## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000003487

Entity Name: TILE DESIGN, LLC

FILED Feb 24, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1923 NW 23RD BLVD. 4227 NW 166TH AVE.

GAINESVILLE, FL 32653 US #124 GAINESVILLE, FL 32605 US

**Current Mailing Address: New Mailing Address:** 

5200 NW 43RD ST., SUITE 102-162 5200 NW 43RD ST. SUITE#102-162 GAINESVILLE, FL 32606

GAINESVILLE, FL 32606

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CASTOR, AMBER CASTOR, AMBER 1923 NW 23RD BLVD. 4227 NW 166TH AVE. US

#124 GAINESVILLE, FL 32653 GAINESVILLE, FL 32605 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: AMBER CASTOR 02/24/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Change () Addition () Delete

CASTOR, AMBER Name: Name: Address: 5200 NW 43RD ST. SUITE 102-162 Address: City-St-Zip: GAINESVILLE, FL 32606 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: AMBER CASTOR 02/24/2009