2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000006756

1. Entity Name
LEGACY TILE & MARBLE, LLC

ORIGINAL **FILED**
Feb 21, 2008 08:00 AM
Secretary of State

Principal Place of Business	Mailing Address
12052 ALT A1A C3 PALM BEACH GARDENS, FL 33410 US	12052 ALT A1A C3 PALM BEACH GARDENS, FL 33410 US

DO NOT WRITE IN THIS SPACE

01282008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
20-0645076	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

PUZA, JOSEPH
12052 ALT A1A
C3
PALM BEACH GARDENS, FL 33410

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	PUZA, JOSEPH
STREET ADDRESS	1222 ARAPAHO STREET
CITY-ST-ZIP	JUPITER, FL 33458
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000833584
02/28/08-80019-016 138.75

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _Joseph Puza_   2-19-08   561-719-8942
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #