

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000013928

FILED
Oct 23, 2008
Secretary of State**Entity Name:** ANGELOTTI ADJUSTMENTS LLC**Current Principal Place of Business:**23157 OLD INLET BRIDGE DR
BOCA RATON, FL 33433**New Principal Place of Business:****Current Mailing Address:**23157 OLD INLET BRIDGE DR
BOCA RATON, FL 33433**New Mailing Address:****FEI Number:** 20-0431817**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ANGELOTTI, EUGENE
23157 OLD INLET BRIDGE DR
BOCA RATON, FL 33433 US**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent_____
Date**MANAGING MEMBERS/MANAGERS:**Title: MGR () Delete
Name: ANGELOTTI, EUGENE
Address: 23157 OLD INLET BRIDGE DR
City-St-Zip: BOCA RATON, FL 33433Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: MGR () Change (X) Addition
Name: ANGELOTTI, JAMES
Address: 8700 WINDY CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33472

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: JAMES ANGELOTTI

MM

10/23/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date