## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000034210

Entity Name: LOLO, LLC

FILED Jan 22, 2008 Secretary of State

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

601 N. CONGRESS AVENUE 4332 BOCAIRE BLVD SUITE 423 BOCA RATON, FL 33487

DELRAY BEACH, FL 33445

Current Mailing Address: New Mailing Address:

601 N. CONGRESS AVENUE 4332 BOCAIRE BLVD SUITE 423 BOCA RATON, FL 33487 DELRAY BEACH, FL 33445

FEI Number: 56-2463572 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LEVIN, MITCHELL
601 N. CONGRESS AVENUE
SUITE 423
LEVIN, MITCHELL
4332 BOCAIRE BLVD
BOCA RATON, FL 33487 US

DELRAY BEACH, FL 33445 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: MITCHELL LEVIN 01/22/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

Name: LEVIN, LOIS Name: LEVIN, LOIS Address: 601 N. CONGRESS AVENUE, SUITE 423 Address: 4332 BOCAIRE BLVD

Address: 601 N. CONGRESS AVENUE, SUITE 423 Address: 4332 BOCAIRE BLVD
City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: BOCA RATON, FL 33487

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: LOIS LEVIN PRES 01/22/2008