

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040118

Entity Name: GROCER STUFF LLC

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

5209 NW 74 AVE,
SUITE 215
MIAMI, FL 33166 US

New Principal Place of Business:

5201 NW 74 AVE,
MIAMI, FL 33166 US

Current Mailing Address:

5209 NW 74 AVE,
SUITE 215
MIAMI, FL 33166 US

New Mailing Address:

5201NW 74 AVE,
MIAMI, FL 33166 US

FEI Number: 13-4309199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRIAL, JOSSUE
5209 NW 74 AVE,
SUITE 215
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

BARRIAL, JOSSUE
5201NW 74 AVE,
MIAMI, FL 33166 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: JOSSUE BARRIAL

03/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PD () Delete
Name: BARRIAL, JOSSUE
Address: 5209 NW 74 AVE, SUITE 215
City-St-Zip: MIAMI, FL 33166 US

Title: VP () Delete
Name: HUEZO, ANGEL A
Address: 5209 NW 74TH AVE, SUITE 215
City-St-Zip: MIAMI, FL 33166 US

ADDITIONS/CHANGES:

Title: PD (X) Change () Addition
Name: BARRIAL, JOSSUE
Address: 5201 NW 74 AVE,
City-St-Zip: MIAMI, FL 33166 US

Title: VP (X) Change () Addition
Name: HUEZO, ANGEL A
Address: 5201 NW 74TH AVE,
City-St-Zip: MIAMI, FL 33166 US

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: JOSSUE BARRIAL

PRE

03/23/2009

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