

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L04000064990

**FILED**  
**Oct 07, 2011**  
**Secretary of State**

**Entity Name:** OWENS ORGANIZATION, LLC

**Current Principal Place of Business:**

485 NORTH EAST 128TH STREET  
NORTH MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

485 NORTH EAST 128TH STREET  
NORTH MIAMI, FL 33181

**New Mailing Address:**

**FEI Number:** 73-1717937

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OWENS, ROBERT  
485 NORTH EAST 128TH STREET  
NORTH MIAMI, FL 33161 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  
Name: OWENS, ROBERT V.  
Address: 485 NORTH EAST 128TH STREET  
City-St-Zip: NORTH MIAMI, FL 33161

I hereby 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: ROBERT V. OWENS

MGR

10/07/2011

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