

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070283

Entity Name: ZUCCA, LLC

FILED
Mar 26, 2009
Secretary of State

Current Principal Place of Business:

2400 E LAS OLAS BOULEVARD SUITE C
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

2400 E LAS OLAS BOULEVARD SUITE C
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: 20-1672407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIVE, BENJAMIN E ESQ.
% OLIVE & ASSOCIATES PA
2400 E LAS OLAS BLVD, SUITE A
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

OLIVE, BENJAMIN
2400 E LAS OLAS BLVD, SUITE B
FORT LAUDERDALE, FL 33301 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: BENJAMIN OLIVE

03/26/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BAROLO LLC,
Address: 2400 E LAS OLAS BLVD, SUITE C
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: MGRM () Delete
Name: ILINK SOLUTINOS LLC,
Address: 2400 E LAS OLAS BLVD, SUITE C
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BAROLO LLC,
Address: 2400 E LAS OLAS BLVD, SUITE C
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BAROLO LLC

MGR

03/26/2009

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