

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000076325

FILED  
Apr 21, 2009  
Secretary of State

**Entity Name:** GOLDMINE INVESTMENT GROUP, LLC

**Current Principal Place of Business:**

655 NORTHEAST 125TH STREET  
NORTH MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 610141  
NORTH MIAMI, FL 33261

**New Mailing Address:**

**FEI Number:** 14-1917143

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ST PRIX, SHAWN  
655 NE 125TH 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: MGRM ( ) Delete  
Name: JENKINS, SARA  
Address: 655 NE 125TH STREET  
City-St-Zip: NORTH MIAMI, FL 33161

Title: MGRM ( ) Delete  
Name: ST. PRIX, SHAWN  
Address: 655 NE 125TH STREET  
City-St-Zip: NORTH MIAMI, FL 33161

**ADDITIONS/CHANGES:**

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

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: SHAWN ST.PRIX

MGRM

04/21/2009

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