2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # L04000079237** 1. Entity Name HERNY, LLC

Jun 02, 2008 8:00 am Secretary of State 05-02-2008 90013 045 \*\*\*138.75

**FILED** 

Principal Place of Business 3233 N COVINGTON DR DELTONA, FL 32738 US

Mailing Address

3233 N COVINGTON DR DELTONA, FL 32738 US



04052008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	Applied For
20-1821430	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Regulard

6. Name and Address of Current Registered Agent

HERNADEZ, LUIS 3233 N COVINGTON DR DELTONA, FL 32738

## DO NOT WRITE IN THIS SPACE

4/18/08

8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE_	Signature, typed or presend name of requested agent and title if applicable.	(NOTE: Registance Agent agreeture required when remotating) DATE		
	NOW!!! FEE IS \$138.75 , 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS	. 1		
TITLE NAME SIREET ADDRESS CITY-ST-ZIP	MGR HERNADEZ, LUIS 3233 N COVINGTON DR DELTONA, FL 32738			
TITLE NAME STREET ADDRESS CHY-SI-ZEP				
TIFLE MAME STREET ADDRESS CITY-SI-ZIP		DO NOT WRITE		
TITLE NAME — STREET ADDRESS CITY-SI-ZIP		IN THIS SPACE	-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· ·		
TITLE NAME STREET ADDRESS CITY-S1-ZIP				
indicated	on this report is true and accurate and that my signature si	quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information hall have the same legal effect as if made under oath; that I am a managing member or manager of the cute this report as required by Chapter 606. Florida Statutes.	<u>,</u>	