

# **2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L04000084854

**FILED**  
**Nov 24, 2008**  
**Secretary of State**

**Entity Name:** JULIN'S FLOORING & PAINTING LLC

**Current Principal Place of Business:**

3408 CHERRY RIDGE RD.  
LYNN HAVEN, FL 32444 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1624  
LYNN HAVEN, FL 32444 US

**New Mailing Address:**

3408 CHERRY RIDGE RD.  
LYNN HAVEN, FL 32444 US

**FEI Number:** 20-1857019

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JULIN, RAUL A  
3408 CHERRY RIDGE ROAD  
LYNN HAVEN, FL 32444 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: JULIN, RAUL A  
Address: P.O BOX. 1624  
City-St-Zip: LYNN HAVEN, FL 32444 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: JULIN, RAUL A  
Address: 3408 CHERRY RIDGE RD.  
City-St-Zip: LYNN HAVEN, FL 32444 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:** RAUL A. JULIN

MS

11/24/2008

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