

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000089559

Entity Name: EZ ICE, LLC

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

4149 SE SALERNO RD.
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

197 65TH TERRACE NORTH
WEST PALM BEACH, FL 33413 US

New Mailing Address:

FEI Number: 20-1998442 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 US

Name and Address of New Registered Agent:

LURTZ, PETER H MGRM
197 65TH TERRACE NORTH
W. PALM BEACH, FL 33412 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: PETER LURTZ

05/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LARSON, JAMES K II
Address: 197 65TH TERRACE NORTH
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: MGRM () Delete
Name: LURTZ, PETER
Address: 197 65TH TERRACE NORTH
City-St-Zip: WEST PALM BEACH, FL 33413 US

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: JAMES K LARSON II

MGRM

05/01/2009

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