

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000009497

FILED
Oct 26, 2006
Secretary of State**Entity Name:** ZHYLA LLC**Current Principal Place of Business:**186 GOLF CLUB LANE
A
VENICE, FL 34293 US**New Principal Place of Business:**3926 LUNDALE AVE
NORTH PORT, FL 34286 US**Current Mailing Address:**186 GOLF CLUB LANE
A
VENICE, FL 34293 US**New Mailing Address:**3926 LUNDALE AVE
NORTH PORT, FL 34286 US**FEI Number:** 20-2288066**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ZHYLA, YURIY
186 GOLF CLUB LANE
A
VENICE, FL 34293 US**Name and Address of New Registered Agent:**ZHYLA, YURIY
3926 LUNDALE AVE
NORTH PORT, FL 34286 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: ZHYLA YURIY

10/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:Title: MGRM () Delete
Name: ZHYLA, YURIY
Address: 186 GOLF CLUB LANE #A
City-St-Zip: VENICE, FL 34293 USTitle: MGRM () Delete
Name: ZHYLA, NATALIYA
Address: 186 GOLF CLUB LANE #A
City-St-Zip: VENICE, FL 34293 US**ADDITIONS/CHANGES:**Title: MGRM (X) Change () Addition
Name: ZHYLA, YURIY
Address: 3926 LUNDALE AVE
City-St-Zip: NORTH PORT, FL 34286 USTitle: MGRM (X) Change () Addition
Name: ZHYLA, NATALIYA
Address: 3926 LUNDALE AVE
City-St-Zip: NORTH PORT, FL 34286 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ZHYLA YURIY

MGRM

10/26/2006

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