2008 LIMITED LIABILITY COMPANY ANNUAL REPORT				FILED Apr 28, 2008 08:00 A Secretary of State	
1. Entity Nam		355		S.	ecretary of State
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Principal Plac 6225 OLD B MILTON, FL		Mailing Address 6225 OLD BAGDAD HWY MILTON, FL 32583	P		00/01 10/10 01/02 1/01 0/07 0/101 0/101 001
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	O NOT WRITE	IN THIS SP/	ACE	04152008 No Chg-LLC	CR2E083 (12/07)
ander neder i Verkaar in d		Constant State State State State State		20-2630787 5. Certificate of Status Desired	\$5.00 Additional
<u> </u>	6. Name and Address of Current R	legistered Agent	markinika a marka	100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100	Fee Required
	ROBERT E BAGDAD HWY			DO NOT W IN THIS SP	
the obligat	named entity submits this statement for tions of registered agent. Signature. Typed of printed name of registered agent an		stered Agent signature required	when reinstating)	DATE
the obligat SIGNATURE. FILE After May	Signature: Typed or printed name of registered agent an NOWIN FEE IS \$138.75 y 1, 2008 Fee will be \$538.75	nd title if applicable (NOTE, Regi		when reinstating) 	
the obligat SIGNATURE.	Signature. Typed or printed name of registered agent an	nd title if applicable (NOTE, Regi			
the obligat SIGNATURE. FILE Aftor May 9. TITLE VAME STREET ADDRESS	Signature Typed or printed name of registered agent an Signature Typed or printed name of registered agent an <b>NOWILL FEE IS \$138.75</b> <b>NANAGING MEMBER</b> MGR ELLIOTT, ROBERT E 6225 OLD BAGDAD HWY	nd title if applicable (NOTE, Regi			
the obligat SIGNATURE. FILE Aftor May 9. UITLE NAME STREET ADDRESS CITY-ST-ZIP UITLE NAME STREET ADDRESS STREET ADDRESS	Signature Typed or printed name of registered agent an Signature Typed or printed name of registered agent an <b>NOWILL FEE IS \$138.75</b> <b>NANAGING MEMBER</b> MGR ELLIOTT, ROBERT E 6225 OLD BAGDAD HWY	nd title if applicable (NOTE, Regi		U000009 n5/21/08-8 DO NOT W	30413 1107-009 138.75 <b>RITE</b>
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