

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000023960

FILED
Jun 15, 2009
Secretary of State

Entity Name: HERRICKS INVESTMENT GROUP, LLC

Current Principal Place of Business:

8023 CARNOUSTIE PLACE
#4214
PORT ST LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

94 HUSSON ST
APT C
STATEN ISLAND, NY 10305

New Mailing Address:

FEI Number: 20-2519733 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:

Name and Address of New Registered Agent:

FERRARA, SAMUEL A
8023 CARNOUSTIE PL #4214
PORT ST. LUCIE, FL 34986 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: GONZALEZ, PAUL
Address: 30 OHIO AVENUE
City-St-Zip: MASSAPEQUA, NY 11758

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: FERRARA, SAMUEL A
Address: 8023 CARNOUSTIE PLACE
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: VIOLA, CHRISTOPHER
Address: 239 CAMPBELL AVENUE
City-St-Zip: WILLISTON PARK, NY 11596

Title: MGRM (X) Change () Addition
Name: VIOLA, CHRISTOPHER
Address: 370 NASSAU BLVD
City-St-Zip: NEW HYDE PARK, NY 11040

Title: MGRM () Delete
Name: GUERRA, STEVEN C
Address: 66 TENAFLY DRIVE
City-St-Zip: NEW HYDE PARK, NY 11040

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: SAMUEL FERRARA

MGRM

06/15/2009

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