

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025075

Entity Name: GRAJEDA FLOORING LLC

FILED
Apr 01, 2009
Secretary of State

Current Principal Place of Business:

9769 ARBOR OAKS LN, 206
BOCA RATON, FL 33428

New Principal Place of Business:

9769 ARBOR OAKS LN # 206
BOCA RATON, FL 33428

Current Mailing Address:

9769 ARBOR OAKS LN, 206
BOCA RATON, FL 33428

New Mailing Address:

9769 ARBOR OAKS LN #206
BOCA RATON, FL 33428

FEI Number: 20-2499098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAJEDA, RENZO
6900 SOUTHGATE BLVD
206
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

GRAJEDA, RENZO
9769 ARBOR OAKS LANE
206
BOCA RATON, FL 33428 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: MALACHITA MOLYNEAUX

04/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GRAJEDA, RENZO
Address: 6900 SOUTHGATE BLVD #206
City-St-Zip: TAMARAC, FL 33321

Title: MGRM () Delete
Name: MOLYNEAUX, MALACHITA
Address: 3169 HYPOLUXO ROAD
City-St-Zip: LANTANA, FL 33462

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: MOLYNEAUX, MALACHITA
Address: 9769 ARBOR OAKS LANE #206
City-St-Zip: BOCA RATON, FL 33428

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: MALACHITA MOLYNEAUX

MGR

04/01/2009

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