

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000032693

FILED  
Apr 28, 2009  
Secretary of State**Entity Name:** AOTD L.L.C.**Current Principal Place of Business:**1809 E. BROADWAY ST.  
SUITE 311  
OVIDO, FL 32765**New Principal Place of Business:****Current Mailing Address:**1809 E. BROADWAY ST.  
SUITE 311  
OVIDO, FL 32765**New Mailing Address:****FEI Number:** FEI Number Applied For  FEI Number Not Applicable  Certificate of Status Desired **Name and Address of Current Registered Agent:**SMALL BUSINESS RESOURCES USA, INC.  
1601 PARK CENTER DRIVE  
SUITE 6A  
ORLANDO, FL 32835 US**Name and Address of New Registered Agent:**

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:**Title: MGR  Delete  
Name: BOCANEGRA, MIKE  
Address: 1809 E. BROADWAY ST., STE 311  
City-St-Zip: OVIDO, FL 32765**ADDITIONS/CHANGES:**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: MIKE BOCANEGRA

MGR

04/28/2009

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