

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000078905

**FILED**  
**Feb 19, 2008**  
**Secretary of State**

**Entity Name:** GREENER DAZE CONSULTING, LLC

**Current Principal Place of Business:**

9040 S.W. 171 TERRACE  
MIAMI, FL 33157 US

**New Principal Place of Business:**

10481 SW ACADEMIC WAY  
PORT SAINT LUCIE, FL 34987 US

**Current Mailing Address:**

9040 S.W. 171 TERRACE  
MIAMI, FL 33157 US

**New Mailing Address:**

10481 SW ACADEMIC WAY  
PORT SAINT LUCIE, FL 34987 US

**FEI Number:** 20-3912448

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BROWN, ROBIN D  
9040 S.W. 171 TERRACE  
MIAMI, FL 33157 US

**Name and Address of New Registered Agent:**

BROWN, ROBIN D  
10481 SW ACADEMIC WAY  
PORT SAINT LUCIE, FL 34987 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:

02/19/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BROWN, ROBIN D  
Address: 9040 S.W. 171 TERRACE  
City-St-Zip: MIAMI, FL 33157 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BROWN, ROBIN D  
Address: 10481 SW ACADEMIC WAY  
City-St-Zip: PORT SAINT LUCIE, FL 34987 US

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: ROBIN D. BROWN

PRES

02/19/2008

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