2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000079990

1. Entity Name
BAYO, LLC

Principal Place of Business	Mailing Address
16428 RUBY LAKE WESTON, FL 33331	16428 RUBY LAKE WESTON, FL 33331

40115939

05032007   Chg-LLC   CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	
Zip	Country	Zip	Country

4. FEI Number	Applied For
20-3302941	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410	Name _Miguel Barajas_ Street Address (P.O. Box Number is Not Acceptable) _16428 Ruby Lake_ City _Weston_ FL Zip Code _33331_

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _Miguel W. Barajas B - Miguel Barajas_   _5/3/07_
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by September 14, 2007

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE **MGR** NAME **BARAJAS, MIGUEL** STREET ADDRESS **16428 RUBY LAKE** CITY-ST-ZIP **WESTON, FL 33331**	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _Miguel W. Barajas B - Miguel Barajas_   _5/3/07_ (954) 824-1671
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #