

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000106578

FILED
Apr 24, 2008
Secretary of State

Entity Name: THE LAW OFFICES OF DORIE ORTIZ, P.L.

Current Principal Place of Business:

6034 CHESTER AVE.
107B
JACKSONVILLE, FL 32217 US

New Principal Place of Business:

6821 SOUTHPOINT DR. N.,
109
JACKSONVILLE, FL 32216 US

Current Mailing Address:

P.O. BOX 440455
JACKSONVILLE, FL 32222 US

New Mailing Address:

FEI Number: 13-4314082 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ORTIZ, DORIE
6034 CHESTER AVE.
107B
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

ORTIZ, DORIE
6821 SOUTHPOINT DR.
109
JACKSONVILLE, FL 32216 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: DORIE ORTIZ

04/24/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ORTIZ, DORIE
Address: P.O. BOX 440455
City-St-Zip: JACKSONVILLE, FL 32222 US

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: DORIE ORTIZ

MGRM

04/24/2008

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