

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000113960

Entity Name: ARCHISCAPES, LLC

FILED
Jan 28, 2008
Secretary of State

Current Principal Place of Business:

1562 BAY GROVE RD.
FREEPORT, FL 32439

New Principal Place of Business:

Current Mailing Address:

1562 BAY GROVE RD.
FREEPORT, FL 32439

New Mailing Address:

FEI Number: 20-1732336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LYNCHARD LAW FIRM, P.A.
7552 NAVARRE PARKWAY STE 9
NAVARRE, FL 32566 US

Name and Address of New Registered Agent:

LYNCHARD LAW FIRM, P.A.
1901 ANDORRA STREET
NAVARRE, FL 32566 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: AMY STOYLES

01/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MG () Delete
Name: STOYLES, AMY
Address: 1562 BAY GROVE RD.
City-St-Zip: FREEPORT, FL 32439

Title: MGMR () Delete
Name: STOYLES, CHRIS
Address: 1562 BAY GROVE RD.
City-St-Zip: FREEPORT, FL 32439

ADDITIONS/CHANGES:

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

Title: MG (X) Change () Addition
Name: STOYLES, CHRIS
Address: 1562 BAY GROVE RD.
City-St-Zip: FREEPORT, FL 32439

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: AMY STOYLES

MG

01/28/2008

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