

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000123000

Entity Name: DOG TIRED, LLC

FILED
Jun 26, 2009
Secretary of State

Current Principal Place of Business:

14512 GATORLAND DRIVE
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

14512 GATORLAND DRIVE
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 20-4029469 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BAYER, MATTHEW D
954 WILLOW GROVE STREET
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

BAYER, MATTHEW D
4116 LAKE CONWAY WOODS BLVD
ORLANDO, FL 32812 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: MATTHEW D BAYER

06/26/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KIRVEN, JOSEPH
Address: 1129 W YALE STREET
City-St-Zip: ORLANDO, FL 32804

Title: MGRM () Delete
Name: BAYER, MATTHEW D
Address: 954 WILLOW GROVE STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: BAYER, MATTHEW D
Address: 4116 LAKE CONWAY WOODS BLVD
City-St-Zip: ORLANDO, FL 32812

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: JOSEPH M. KIRVEN

MGRM

06/26/2009

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