

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000123000

Entity Name: DOG TIRED, LLC

**FILED**  
**Feb 02, 2012**  
**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 ( )

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

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

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

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

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

I hereby 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: MATTHEW BAYER

MM

02/02/2012

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