

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000003894

1. Entity Name
DIAZ FUNIDING LLC



Principal Place of Business
1304 DESOTO AVE., SUIT 202
TAMPA, FL 33606

Mailing Address
10436 ORANGE GROVE DR
TAMPA, FL 33618

FILED
Aug 18, 2008 08:00 AM
Secretary of State



08042008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
42-1693238

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

DIAZ, DESIREE
10436 ORANGE GROVE DR
TAMPA, FL 33618

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renewing)

DATE

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

B. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
DIAZ, DESIREE
10436 ORANGE GROVE DR
TAMPA, FL 33618

TITLE
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CITY-ST-ZIP

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08/18/08-80002-008 138.75

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IN THIS SPACE**

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:

Desiree Diaz

8/13/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #