

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000008153

Entity Name: SUNBED SERVICE LLC

FILED
May 05, 2008
Secretary of State

Current Principal Place of Business:

10829 MASTERS DR
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

10829 MASTERS DR
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 20-4487508 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

Name and Address of New Registered Agent:

COOK, NICHOLAS
10829 MASTERS DR
CLERMONT, FL 34711 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COOK, NICHOLAS
Address: 10829 MASTERS DR
City-St-Zip: CLERMONT, FL 34711

Title: MGRM () Delete
Name: RAIMONDO, SARA
Address: 10829 MASTERS DR
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES:

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

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: NICHOLAS COOK

MGRM

05/05/2008

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