

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000012191

Entity Name: VERBORITAS LLC

FILED  
May 01, 2008  
Secretary of State

## Current Principal Place of Business:

879 NW 110TH TERRACE  
PLANTATION, FL 33324 US

## New Principal Place of Business:

6007 N GOLDEN BEAUTY LN  
TAMARAC, FL 33321 US

## Current Mailing Address:

879 NW 110TH TERRACE  
PLANTATION, FL 33324 US

## New Mailing Address:

6007 N GOLDEN BEAUTY LN  
TAMARAC, FL 33321 US

FEI Number: 68-0622949      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:

LAMOTHE, FERNAND  
879 NW 110TH TERRACE  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

LAMOTHE, FERNAND  
6007 N GOLDEN BEAUTY LN  
TAMARAC, FL 33321 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:

05/01/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: CHADWELL MANAGEMENT, INC.  
Address: 879 NW 110TH TERRACE  
City-St-Zip: PLANTATION, FL 33324 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: CHADWELL MANAGEMENT, INC.  
Address: 6007 N GOLDEN BEAUTY LN  
City-St-Zip: TAMARAC, FL 33321 US

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: FERNAND LAMOTHE

P

05/01/2008

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