

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000019338

Entity Name: NATE'S CUTS LLC

FILED  
Apr 27, 2008  
Secretary of State

**Current Principal Place of Business:**

194 ARBOR LANE  
EDGEWATER, FL 32141

**New Principal Place of Business:**

**Current Mailing Address:**

194 ARBOR LANE  
EDGEWATER, FL 32141

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

ALLEN, NATHAN  
194 ARBOR LANE  
EDGEWATER, FL 32141 US

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

ALLEN, NATHAN P OWNER  
194 ARBOR LANE  
EDGEWATER, FL 32141 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: NATHAN ALLEN

04/27/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ALLEN, NATHAN  
Address: 194 ARBOR LANE  
City-St-Zip: EDGEWATER, FL 32141

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ALLEN, NATHAN P OWNER  
Address: 194 ARBOR LANE  
City-St-Zip: EDGEWATER, FL 32141

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: NATHAN P ALLEN

MR.

04/27/2008

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