

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000022039

Entity Name: LOVE HANDLES LLC

FILED
Mar 03, 2009
Secretary of State

Current Principal Place of Business:

525 DRIFTWOOD RD.
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

3543 EVERGLADES RD
PALM BEACH GARDENS, FL 33410

New Mailing Address:

525 DRIFTWOOD ROAD
NORTH PALM BEACH, FL 33408

FEI Number: 01-0858181

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRINK, BROOKE
3543 EVERGLADES RD
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

BRINK, BROOKE
525 DRIFTWOOD ROAD
NORTH PALM BEACH, FL 33408 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: BROOKE BRINK

03/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BRINK, BROOKE
Address: 3543 EVERGLADES RD
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGRM () Delete
Name: MELZARD, CORINNE
Address: 701 TIMBERLANE CIRCLE
City-St-Zip: GREENACRES, FL 33463

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BRINK, BROOKE
Address: 525 DRIFTWOOD ROAD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: MGRM (X) Change () Addition
Name: EVANS, CORINNE
Address: 701 TIMBERLANE CIRCLE
City-St-Zip: GREENACRES, FL 33463

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: BROOKE BRINK

MRS

03/03/2009

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