

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000027519

FILED
Apr 23, 2008
Secretary of State

Entity Name: PICKLE-IT, LLC

Current Principal Place of Business:

4145 S.W. 47TH AVENUE
DAVIE, FL 33314 US

New Principal Place of Business:

Current Mailing Address:

4145 S.W. 47TH AVENUE
DAVIE, FL 33314 US

New Mailing Address:

FEI Number: 20-4643860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, TIMOTHY B
4145 S.W. 47TH AVENUE
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

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: FOSTER, DAVID
Address: 4145 S.W. 47TH AVENUE
City-St-Zip: DAVIE, FL 33314 US

Title: MGRM () Delete
Name: FOSTER, JONATHAN N
Address: 4145 S.W. 47TH AVENUE
City-St-Zip: DAVIE, FL 33314 US

Title: MGRM () Delete
Name: FOSTER, STEPHEN F
Address: 4145 S.W. 47TH AVENUE
City-St-Zip: DAVIE, FL 33314 US

Title: MGRM () Delete
Name: FOSTER, TIMOTHY B
Address: 4145 S.W. 47TH AVENUE
City-St-Zip: DAVIE, FL 33314 US

ADDITIONS/CHANGES:

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

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

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: TIMOTHY B. FOSTER

MGRM

04/23/2008

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