

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000042170

FILED
May 01, 2008
Secretary of State

Entity Name: GOLDEN HOUSE LLC

Current Principal Place of Business:

108 NEVA DRIVE
WEST PALM BEACH, FL 33415 US

New Principal Place of Business:

365 HOLLY DR
WEST PALM BEACH, FL 33415 US

Current Mailing Address:

108 NEVA DRIVE
WEST PALM BEACH, FL 33415 US

New Mailing Address:

365 HOLLY DR
WEST PALM BEACH, FL 33415 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)
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:

LAVENDER, KYLE
873 WESTBAY DRIVE
105
LARGO, FL 33770 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: LOPEZ, SAMIR
Address: 108 NEVA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: MGRM () Delete
Name: LOPEZ, SERGIO
Address: 108 NEVA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LOPEZ, SAMIR
Address: 365 HOLLY DR
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: MGRM (X) Change () Addition
Name: LOPEZ, SERGIO
Address: 365 HOLLY DR
City-St-Zip: WEST PALM BEACH, FL 33415 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: SERGIO LOPEZ

SR

05/01/2008

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