2008 LIMITED LIABILITY COMPANY ANNUAL REPORT				FILED Apr 25, 2008-08:00 Al	
DOCUMENT # L06000042870 1. Entity Name 110%, LLC				Apr 25, 2008 08:00 AN Secretary of State	
Principal Place of Business Mailing Address 1923 ROTHBURY DRIVE 1923 ROTHBURY DRIVE					
		JACKSONVILLE, FL 32221) (2014011 21) 12112 2111 02111 02111 02111 april 01010 11011 1011 1021 001201 111 1001	
DO NOT WRITE IN THIS SP			PACE	04232008No Chg-LLC CR2E083 (12/07)	
				4. FEI Number 20-4802924	Applied For Not Applicable
		,	•	5. Certificate of Status Desired	d S5.00 Additional Fee Required
	6. Name and Address of Current Re	agistered Agent	demonstra 11100	and dates program a spect	
WHEELER, PETE 1923 ROTHBURY DRIVE				DO NOT V	VRITE
JACKSONVILLE, FL 32221			* *	IN THIS S	
				α α α α α α α α α α α α α α	
. The above the obliga	e named entity submits this statement for t tions of registered agent.	he purpose of changing its registere	ed office or register	ad agent, or both, in the State of	Florida. I am familiar with, and accept
IGNATURE	and a second and a s			ersilari Galactic Salactic La construction	
· · · · · · · · · · · · · · · · · · ·	Signature, typed or printed name of registered agent and	title if applicable (NOTE: Registered	d Agent signature required	when reinstating)	DATE
	E NOWIII FEE IS \$138.75 y 1, 2008 Fee will be \$538.75	· · · · · · · · · · · · ·			
TLE	MANAGING MEMBER	S/MANAGERS			
ME	WHEELER, PETE				19921481# 1993
REET ADDRESS TY-ST-ZIP	1923 ROTHBURY DRIVE JACKSONVILLE, FL 32221				3-80008-013 138.75
TLE AME	MGRM BUENING, JOHN W				
REET ADDRESS	1923 ROTHBURY DRIVE				
TY-ST-ZIP	JACKSONVILLE, FL 32221				
ME REET ADDRESS	BUENING, JOHN E 1923 ROTHBURY DRIVE				
Y-ST-ZIP	JACKSONVILLE, FL 32221				그 방법에 관계하면 말에 관계하는 것이 같아. 말에 있는 것이 같아.
'LE ME	MGRM FARRIS, BILL L			IN THIS S	PACE
REET ADDRESS Y-ST-ZIP	1923 ROTHBURY DRIVE JACKSONVILLE, FL 32221				
LE					
ne Ieet address					
Y-ST-ZIP	· · · · ·	· · · ·			
LE : ME :					
REET ADDRESS	ـــــــــــــــــــــــــــــــــــــ		्याः स्थाप्तः सिन्दः दीव्दःः सिन्दः	And the state of t	
 I hereby indicated limited lia 	certify that the information supplied with the on this report is true and accurate and the billity company or the receiver or trues of the section of the se	his filing does not qualify for the exi- nat my signature shall have the sam improvered to execute this report a	emptions contained ne legal effect as if is required by Chap	in Chapter 119, Florida Statute made under oath; that I am a n ter 608. Florida Statutes.	 I further certify that the information nanaging member or manager of the
	6///			Hasha	904/7839393
IGNAT		SNING MANAGING MEMBER, OR AUTHORIZE		Daie	Dayture Phone #

. _ . _ . .

_ _

__ . . . _ . _ . _ . _