

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000044511

FILED
Oct 09, 2008
Secretary of State**Entity Name:** KAZDEN LLC**Current Principal Place of Business:**533 EAGLE POINTE SOUTH
KISSIMMEE, FL 34746 US**New Principal Place of Business:****Current Mailing Address:**533 EAGLE POINTE SOUTH
KISSIMMEE, FL 34746 US**New Mailing Address:**172 ADNITT ROAD
NORTHAMPTON, UK NN3 4NL UK**FEI Number:** 16-1759856**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GEDDES, KAREN J
533 EAGLE POINTE SOUTH
KISSIMMEE, FL 34746 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: GEDDES, KAREN J
Address: 533 EAGLE POINTE SOUTH
City-St-Zip: KISSIMMEE, FL 34746 US**Title:** MGRM () Delete
Name: GEDDES, DENNIS R
Address: 533 EAGLE POINTE SOUTH
City-St-Zip: KISSIMMEE, FL 34746 US**ADDITIONS/CHANGES:****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: KJ GEDDES

MGR

10/09/2008

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