

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000056166

Entity Name: LIVE IN INTERIORS, LLC

FILED  
Jan 20, 2009  
Secretary of State

**Current Principal Place of Business:**

2100 NW 63RD TERRACE  
GAINESVILLE, FL 32605

**New Principal Place of Business:**

**Current Mailing Address:**

2100 NW 63RD TERRACE  
GAINESVILLE, FL 32605

**New Mailing Address:**

FEI Number: 58-9709380

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KAIL, LUDIVINE  
2100 NW 63RD TERRACE  
GAINESVILLE, FL 32605 US

**Name and Address of New Registered Agent:**

KAIL, LUDIVINE C OWNER  
2100 NW 63RD TERRACE  
GAINESVILLE, FL 32605 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: LUDIVINE KAIL

01/20/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KAIL, LUDIVINE  
Address: 2100 NW 63RD TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: KAIL, LUDIVINE C OWNER  
Address: 2100 NW 63RD TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

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: LUDIVINE KAIL

MGRM

01/20/2009

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