

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000066443

Entity Name: ODORONIX, LLC

**FILED**  
**Jan 20, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4008 GREYSTONE DR  
CLERMONT, FL 34711 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 121567  
CLERMONT, FL 34712

**New Mailing Address:**

FEI Number: 20-5136407

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAIL, LIAM  
4008 GREYSTONE DR  
CLERMONT, FL 34711 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: MGMR  
Name: HAIL, LIAM  
Address: 4008 GREYSTONE DR  
City-St-Zip: CLERMONT, FL 34711 US

Title: MGMR  
Name: HOBART, JAMES  
Address: 112 S HAMPTON AVE  
City-St-Zip: ORLANDO, FL 32803 US

I hereby 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: LIAM HAIL

MGMR

01/20/2010

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