## 2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT # L06000074789  1. Entity Name BARNIE'S FLAVORINGS, LLC							2008 OCT 21 PM 12: 23				
Principal Plac 2126 W. LAN ORLANDO, F	idstreet r		Mailing Address 2126 W. LANDSTREET ROAD ORLANDO, FL 32809			SECRETARY OF STATE TALLAHASSEE.FLORIDA					
2. Principal P	lace of Busir	ness - No P.O. Box #	3. Mailing Address								
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.			09272008	Chg-LLC	CR2E08	3 (12/06)		
City & State			City & State				4. FEI Numb 20-528				oplied For ot Applicable
Zip	Country		Zip Coun		ntry	5. Certific		of Status Desired		5.00 Add ee Require	
	6. Name	and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent e						
DULIN, RA 201 EAST 425 CAPIT	PINE STE	REET A				Street Address (P.O. Box Number is Not Acceptable)					
ORLANDO	), FL 3281	Jī			City	FL Zip Code				e	
<ol> <li>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. I am familiar with, and accept the obligations of registered agent.</li> </ol>											
SIGNATURE											
wg awara, types or printed nemeron registered agent and title it appricable. (NOTE: Hegistered Agent signature required to									DATE		
A	mended <i>f</i>	AR is \$50.00						e check pa a Departme		e	
9.	MGR	MANAGING MEMBE		10.			<u> </u>	ADDITIONS,	_		
NAME STREET ADDRESS CITY-ST-ZIP	MGR BARNIE'S II, INC 2126 W. LANDSTREET ROAD ORLANDO, FL 32809				E IE EET ADDRESS -ST-ZIP	B. Philip Jones, Jr. 2126 W. Landstreet Road					Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	NAME Janustreet ADDRESS 212			nes H. Pugh, Jr. 26 W. Landstreet Road				
TITLE	CII Delete 111				<del></del>	Orl	ando,	FL 32809		☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	N S				e et address -st-zip		800137132608 10/21/0801026008 **400.00				
NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							□ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete			-				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		_	☐ Delete							Change	☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: B. Philip Jones, Jr MGR 407/854-6600  SIGNATURE AND TYPED OR PRINTED MAJE OF SIGNING MANAGING MEMBER, MANAGER OR AUTHORIZED REPRESENTATIVE Date Date Dayling Phone #											