2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mailing Address

Signature, typed or printed name of registered agent and little if applicable.

DOCUMENT # L06000082762

Principal Place of Business 100 S. PINE ST.

SIGNATURE

TREÁSURE COAST CLEANING SERVICE, LLC.

FILED Sep 04, 2008 8:00 am Secretary of State

09-04-2008 90001 004 ***138.75

100 S. PINE ST. FELLSMERE, FL 32948		100 S. PINE ST. FELLSMERE, FL 32948			59919029			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07292008 Chg-LLC	CRZ	2E083 (12	7 06)	
City & State		City & State		4. FEI Number 06-1789981		F	Applied For Not Applicable	
Zio	Country		Zip		5. Certificate of Status Desir	ed 🗆		D Additional equired
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
CANTU, GLORIA 617 9TH COURT VERO BEACH, FL 32962				Name Street Address (P.O. Box Number is Not Acceptable)				
				City		F	Zip	Code
The above name	ed entity submits this statement	for the purpose of changing	its registere	ed office or reg	istered agent, or both, in the State	of Florida. 1	am familiar	with, and accept

8/2(108

FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008 In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGRM TITLE ☐ Addition TITLE ☐ Change ☐ Defete NAME CANTU, GLORIA NAME STREET ADDRESS STREET ADDRESS 617 9TH CT. CITY-ST-ZIP VERO BEACH, FL 32962 CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Detete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ■ Addition TITLE ☐ Defete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Defete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 in ownered to execute this report as required by Chapter 608, Florida Statutes.

Owner

SIGNATURE: BIGHATURE AND TYPED OR PRINTED NAME OF STORING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

(NOTE: Registered Agent signature required when reinstating)

ATTACHMENT #C06000082762

I have not received my other money order you said you send to me.

172-713-5601

Treasure Cost Crainer Service

Emoil Cantu. Gloria Grahao. on Treasure Cost Crainer Service

LLC