

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000104277

Entity Name: MARKELLE ARABIANS, LLC

FILED
Jul 14, 2008
Secretary of State

Current Principal Place of Business:

412 BUTTONWOOD LANE
BOYNTON BEACH, FL 33436

New Principal Place of Business:

304 E 3RD AVE
MOUNT DORA, FL 32757

Current Mailing Address:

412 BUTTONWOOD LANE
BOYNTON BEACH, FL 33436

New Mailing Address:

304 E 3RD AVE
MOUNT DORA, FL 32757

FEI Number: 20-5783169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WADE, MICHAEL
412 BUTTONWOOD LANE
BOYNTON BEACH, FL 33436 US

Name and Address of New Registered Agent:

WADE, MICHAEL
304 E 3RD AVENUE
MOUNT DORA, FL 32757 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:

07/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WADE, MICHAEL
Address: 412 BUTTONWOOD LANE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: MGRM () Delete
Name: DESMARTEAU, JOEL
Address: 812 NE 16 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WADE, MICHAEL
Address: 304 E 3RD AVENUE
City-St-Zip: MOUNT DORA, FL 32757

Title: MGRM (X) Change () Addition
Name: DESMARTEAU, JOEL
Address: 304 E 3RD AVENUE
City-St-Zip: MOUNT DORA, FL 32757

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: MICHAEL WADE

MR

07/14/2008

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