

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000107658

FILED
Aug 28, 2008
Secretary of State**Entity Name:** JOSEPH FINANCIAL SERVICES, LLC**Current Principal Place of Business:**6801 LAKE WORTH RD
SUITE 254
GREENACRES, FL 33467 US**New Principal Place of Business:****Current Mailing Address:**6801 LAKE WORTH RD
SUITE 254
GREENACRES, FL 33467 US**New Mailing Address:****FEI Number:** 32-0185921 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JOSEPH, GUTEAU
1897 SHERWOOD FOREST BLVD
WEST PALM BEACH, FL 33415 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:** MGR () Delete
Name: JOSEPH, GUTEAU
Address: 1897 SHERWOOD FOREST BLVD
City-St-Zip: WEST PALM BEACH, FL 33415 US**Title:** MRG () Delete
Name: JOSEPH, JEFFERSON
Address: 1897 SHERWOOD FOREST BLVD
City-St-Zip: WEST PALM BEACH, FL 33415 US**Title:** MGR () Delete
Name: JOSEPH, GEANSLI
Address: 1897 SHERWOOD FOREST BLVD
City-St-Zip: WEST PALM BEACH, FL 33415 US**Title:** MGR (X) Delete
Name: JOSEPH, SERGE
Address: 25 CHESTNUT ST, APT 4L
City-St-Zip: SOUTH NORWALK, CT 06854 US**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: GUTEAU JOSEPH

MGR

08/28/2008

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