

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000107729

FILED  
Jun 15, 2009  
Secretary of State

Entity Name: LYMM INVESTMENTS, LLC.

**Current Principal Place of Business:**

6325 NW 201 LANE  
HIALEAH, FL 33015 US

**New Principal Place of Business:**

**Current Mailing Address:**

6325 NW 201 LANE  
HIALEAH, FL 33015 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

AB CONSULTING & ACCOUNTING SERVICES, INC  
160 NW 176TH ST  
203  
MIAMI GARDENS, FL 33169 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DUPRE, LYONEL  
Address: 6325 NW 201 LANE  
City-St-Zip: HIALEAH, FL 33015 US

Title: MGR ( ) Delete  
Name: DUPRE, MURIELLE T  
Address: 6325 NW 201 LANE  
City-St-Zip: HIALEAH, FL 33015 US

**ADDITIONS/CHANGES:**

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: LYONEL DUPRE

MGMR

06/15/2009

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