2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000108952

1. Entity Name
CARLODALY SPECIALTIES LLC

FILED
Jul 15, 2008 08:00 AM
Secretary of State

Principal Place of Business
2631 HAVANA DRIVE
MIRAMAR, FL 33023 US

Mailing Address
2631 HAVANA DRIVE
MIRAMAR, FL 33023 US

07102008No Chg-LLC CR2E083 (12/07)

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4. FEI Number
NOT APPLICABLE

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, CARLOS M
2631 HAVANA DRIVE
MIRAMAR, FL 33023

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8. 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.

SIGNATURE Carlos Gonzalez CARLOS GONZALEZ 7-10-08
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE

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.

U00000954965
07/15/08-80005-016 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	GONZALEZ, CARLOS M
STREET ADDRESS	2631 HAVANA DRIVE
CITY-ST-ZIP	MIRAMAR, FL 33023
TITLE	MGRM
NAME	GONZALEZ, ODALYS B
STREET ADDRESS	2631 HAVANA DRIVE
CITY-ST-ZIP	MIRAMAR, FL 33023
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Carlos Gonzalez 7-10-08 305-914-6951
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #