

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L06000113220

**FILED**  
**May 10, 2009**  
**Secretary of State****Entity Name:** FORGET ME NOT SCRAPBOOKS, LLC**Current Principal Place of Business:**532 SE CLIFF RD  
PORT ST LUCIE, FL 34984 US**New Principal Place of Business:**355 NW AURORA STREET  
PORT ST LUCIE, FL 34983 US**Current Mailing Address:**532 SE CLIFF RD  
PORT ST LUCIE, FL 34984 US**New Mailing Address:**355 NW AURORA STREET  
PORT ST LUCIE, FL 34983 US**FEI Number:** 02-0534576**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WINSTEAD, MELISSA A  
532 SE CLIFF RD  
PORT ST LUCIE, FL 34984 US**Name and Address of New Registered Agent:**GOSCINIAK, SANDRA L  
355 NW AURORA STREET  
PORT ST LUCIE, FL 34983 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: SANDRA L. GOSCINIAK

05/10/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**Title: MGR ( ) Delete  
Name: WINSTEAD, MELISSA A  
Address: 532 SE CLIFF RD  
City-St-Zip: PORT ST LUCIE, FL 34984 US**ADDITIONS/CHANGES:**Title: MGR (X) Change ( ) Addition  
Name: GOSCINIAK, SANDRA L  
Address: 355 NW AURORA STREET  
City-St-Zip: PORT ST LUCIE, FL 34983 US

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: SANDRA L. GOSCINIAK

MGR

05/10/2009

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