

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Payment	Amount
Account	Description
FILED	
Jan 22, 2008 08:00 A	
Secretary of State	
Approval:	

DOCUMENT # L06000113468

1. Entity Name
SOUTH SHORE FOOD SERVICES, LLC



Principal Place of Business 841 PRUDENTIAL DRIVE, SUITE 1300 JACKSONVILLE, FL 32207	Mailing Address 841 PRUDENTIAL DRIVE, SUITE 1300 JACKSONVILLE, FL 32207
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01092008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-5933616	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DODT, HAROLD R
841 PRUDENTIAL DRIVE, SUITE 1300
JACKSONVILLE, FL 32207

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

000000791353
01/23/08-80072-009 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KDD HOLDINGS, LLC 841 PRUDENTIAL DRIVE, SUITE 1300 JACKSONVILLE, FL 32207
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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: *Harold Dadt*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date _____ Daytime Phone # _____