

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000113882

Entity Name: DLOWE,LLC

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

5285 SW 89TH ST
OCALA, FL 34476 US

New Principal Place of Business:

207 N.E. SANCHEZ AV
OCALA, FL 34470 US

Current Mailing Address:

5285 SW 89TH ST
OCALA, FL 34476 US

New Mailing Address:

207 N.E.SANCHEZ AVENUE
OCALA, FL 34470 US

FEI Number: 20-5957057

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOWE, DAVID W
5285 SW 89TH ST
OCALA, FL 34476 US

Name and Address of New Registered Agent:

LOWE, DAVID W
207 N.E. SANCHEZ AVENUE
OCALA, FL 34470 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:

01/07/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LOWE, DAVID W
Address: 5285 SW 89TH ST
City-St-Zip: Ocala, FL 34476 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LOWE, DAVID W
Address: 207 N.E. SANCHEZ AVENUE
City-St-Zip: Ocala, FL 34470 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: DAVID W. LOWE

MGR

01/07/2008

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