

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000009827

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** PLATINUM MEMORABILIA, LLC

**Current Principal Place of Business:**

3700 CAPITAL CIRCLE SE, APT 622  
TALLAHASSEE, FL 32311

**New Principal Place of Business:**

3211 WHITMAN WAY  
TALLAHASSEE, FL 32311

**Current Mailing Address:**

3700 CAPITAL CIRCLE SE, APT 622  
TALLAHASSEE, FL 32311

**New Mailing Address:**

3211 WHITMAN WAY  
TALLAHASSEE, FL 32311

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

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

JOHNSON, KRAYTON  
3700 CAPITAL CIRCLE SE, APT 622  
TALLAHASSEE, FL 32311    US

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

JOHNSON, KRAYTON D  
3211 WHITMAN WAY  
TALLAHASSEE, FL 32311    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: KRAYTON D JOHNSON

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM    ( ) Delete  
Name: JOHNSON, KRAYTON  
Address: 3700 CAPITAL CIRCLE SE, APT 622  
City-St-Zip: TALLAHASSEE, FL 32311

**ADDITIONS/CHANGES:**

Title: MGRM    (X) Change    ( ) Addition  
Name: JOHNSON, KRAYTON  
Address: 3211 WHITMAN WAY  
City-St-Zip: TALLAHASSEE, FL 32311

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: KRAYTON D JOHNSON

MGRM

04/30/2009

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