

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000010417

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Entity Name:** NORSHELL L.L.C.

**Current Principal Place of Business:**

15926 DAWSON RIDGE DR.  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

12614 ETRUSCAN DR.  
HERNDON, VA 20171

**New Mailing Address:**

**FEI Number:** 56-2637451

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HEMMAT, ALLEN A DR.  
15926 DAWSON RIDGE DR.  
TAMPA, FL 33647 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** HEMMAT, ALLEN A DR.  
**Address:** 15926 DAWSON RIDGE DR.  
**City-St-Zip:** TAMPA, FL 33647

**Title:** MGRM  
**Name:** HEMMAT, MICHELLE P  
**Address:** 12614 ETRUSCAN DR.  
**City-St-Zip:** HERNDON, VA 20171

**Title:** MGRM  
**Name:** HEMMAT, EHSANOLLAH  
**Address:** 12614 ETRUSCAN DR.  
**City-St-Zip:** HERNDON, VA 20171

I hereby 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:** ALLEN A. HEMMAT

MGRM

04/22/2010

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