2008 LIMITED LIABILITY COMPANY

ANNUAL REPORT DOCUMENT # L07000030326





1. Entity Nam GROUP	10 HOLDINGS, LLC								
Principal Place of Business 13815 FAIRWAY ISLAND DRIVE UNIT 1328 ORLANDO, FL 32837		Mailing Address 13815 FAIRWAY ISLAND DRIVE UNIT 1328 ORLANDO, FL 32837					AS MIIE NOM I	IAŘBI IFI IBBK	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01112008	Chg-LLC	CR2E08	33 (12/06)	ł
City & State		City & State			4. FEI Numb	° 8686	497		pplied For
Zip	Country	Zip	Country		5. Certificate	of Status Desired		\$5.00 Ad	
-	- 6Name and Address of Current I	Registered Agent			7. Name and	Address of New	Registered A	gent	
GONZALE	7 LUIS	Name							
13815 FAI UNIT 1328	RWAY ISLAND DRIVE	Street Addres			(P.O. Box Number is Not Acceptable)				
ORLANDO	D, FL 32837		City	у			FL	Zip Coo	de
	named entity submits this statement for tions of registered agent.	the purpose of changing its	registered offi	ice or register	ed agent, or bo	th, in the State of F		amiliar with,	, and accept
SIGNATURE	Signature, typed or printed name of registered agent a	20075	B			. 			
	Signature, typed or printed name or registered agent a	по вое в аррясаме. (АСТЕ	:: negistered Agent	t signature required	when reinstating)		DATE		
	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.75						ke check pa la Departme	-	te
9.	MANAGING MEMBEI	RS/MANAGERS	10.	······		ADDITIONS	CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GONZALEZ, LUIS 13815 FAIRWAY ISLAND DRIVE ORLANDO, FL 32837	☐ Detete	TITLE NAME STREET ADDE					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MENDEZ, DAVID 13815 FAIRWAY ISLAND DRIVE ORLANDO, FL 32837	☐ Defete	TITLE NAME STREET ADDS	RESS				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CRUZ, WILLIAM 13815 FAIRWAY ISLAND DRIVE ORLANDO, FL 32837	☐ Delete	TITLE NAME STREET ADDR	I				☐ Change	☐ Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADOR CITY-ST-ZIP	1				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADOR CITY-ST-ZIP	ı				Change	Addition
TITLE NAME, STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDA CITY-ST-ZIP	ı				Change	☐ Addition
11. I hereby of indicated limited lia	certify that the information supplied with on this report is true and accurate and bility company or the receiver or trystee	this filing does not quality for that my signature spall have the empowered to execute this r	the exemption he same legal eport as requi	ns contained in it effect as if m ired by Chapte	n Chapter 119, ade under oath er 608, Florida				
SIGNAT	URE:	SIGNING MANAGING MEMBER, MAN.	AGER, OR AUTHO	O//	// /OC	F 78		7 :- (0777