

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000034121

Entity Name: BUENAS OLAS, L.L.C.

FILED  
Feb 16, 2010  
Secretary of State

**Current Principal Place of Business:**

4106 ORIOLE AVE.  
PORT ORANGE, FL 321276612

**New Principal Place of Business:**

**Current Mailing Address:**

4106 ORIOLE AVE.  
PORT ORANGE, FL 321276612

**New Mailing Address:**

FEI Number: 20-8962738

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LLOYD, ROBERT  
4106 ORIOLE AVE.  
PORT ORANGE, FL 321276612 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: LLOYD, ROBERT  
Address: 4106 ORIOLE AVE.  
City-St-Zip: PORT ORANGE, FL 321276612

Title: MGRM  
Name: LLOYD, GINA  
Address: 4106 ORIOLE AVE.  
City-St-Zip: PORT ORANGE, FL 321276612

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: GINA LLOYD

MGRM

02/16/2010

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