## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000045049

Entity Name: DESIGN ON THE EDGE, LLC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6845 NARCOOSSEE ROAD 1016 NEW YORK AVENUE UNIT 66 ST. CLOUD, FL 34769 US

ORLANDO, FL 32822 US

Current Mailing Address: New Mailing Address:

6845 NARCOOSSEE ROAD
UNIT 66
UNIT 66
ORLANDO, FL 32822
US

1016 NEW YORK AVENUE
ST. CLOUD, FL 34769
US

FEI Number: 20-8647070 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RAMIREZ, ADRIANNA
6845 NARCOOSSEE ROAD
UNIT 66
UNIT 66
ORLANDO, FL 32822 US

RAMIREZ, ADRIANNA
1016 NEW YORK AVENUE
ST. CLOUD, FL 34769 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: 04/30/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

 Name:
 RAMIREZ, ADRIANNA
 Name:
 RAMIREZ, ADRIANNA

 Address:
 6845 NARCOOSSEE ROAD, UNIT 66
 Address:
 1016 NEW YORK AVENUE

Address: 6845 NARCOUSSEE ROAD, UNIT 66 Address: 1016 NEW YORK AVENUE City-St-Zip: ORLANDO, FL 32822 US City-St-Zip: ST. CLOUD, FL 34769 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: ADRIANNA RAMIREZ MGR 04/30/2009