

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000046846

Entity Name: BARDOM.COM, LLC.

FILED
Jul 08, 2008
Secretary of State

Current Principal Place of Business:

1309 ELIZA ST
KEY WEST, FL 33040 US

New Principal Place of Business:

1107 KEY PLAZA
#300
KEY WEST, FL 33040 US

Current Mailing Address:

1309 ELIZA ST
KEY WEST, FL 33040 US

New Mailing Address:

1107 KEY PLAZA
#300
KEY WEST, FL 33040 US

FEI Number: 26-0663506 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ADLER, DAVID M ESQ
1309 ELIZA ST
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

ADLER, DAVID M ESQ
1107 KEY PLAZA
#300
KEY WEST, FL 33040 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:

07/08/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCINTOSH, SCOTT
Address: 1309 ELIZA
City-St-Zip: KEY WEST, FL 33040

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MCINTOSH, SCOTT
Address: 1107 KEY PLAZA #300
City-St-Zip: KEY WEST, FL 33040

Title: MGR () Change (X) Addition
Name: MARTIN, KEVIN
Address: 546 10TH AVE W
City-St-Zip: KIRKLAND, WA 98033

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: SCOTT MCINTOSH

MGR

07/08/2008

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