

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000047346

FILED
Mar 25, 2009
Secretary of State

Entity Name: ARTISTIC VEIL DESIGN STUDIO LLC

Current Principal Place of Business:

779 TAMiami TRAIL
SUITE 6
PORT CHARLOTTE, FL 33953 US

New Principal Place of Business:

Current Mailing Address:

779 TAMiami TRAIL
SUITE 6
PORT CHARLOTTE, FL 33953 US

New Mailing Address:

FEI Number: 20-8969328 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANZARA, SUSAN E
779 TAMiami TRAIL
SUITE 6
PORT CHARLOTTE, FL 33953 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: MGR () Delete
Name: LANZARA, SUSAN E
Address: 779 TAMiami TRAIL SUITE 6
City-St-Zip: PORT CHARLOTTE, FL 33953 US

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: GUERIN, VALERIE
Address: 779 TAMiami TRAIL SUITE 6
City-St-Zip: PORT CHARLOTTE, FL 33953 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: VALERIE GUERIN

MGR

03/25/2009

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