

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000048098

FILED
Apr 04, 2008
Secretary of State

Entity Name: FYNAMY LLC

Current Principal Place of Business:

505 S. PINE ISLAND RD, #209
PLANTATION, FL 33324

New Principal Place of Business:

505 S. PINE ISLAND RD
#209
PLANTATION, FL 33324

Current Mailing Address:

505 S. PINE ISLAND RD, #209
PLANTATION, FL 33324

New Mailing Address:

505 S. PINE ISLAND RD
#209
PLANTATION, FL 33324

FEI Number: 51-0657298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PHINN, GARFIELD
505 S. PINE ISLAND RD, #209
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

PHINN, GARFIELD
505 S. PINE ISLAND RD
#209
PLANTATION, FL 33324 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: _____

04/04/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PHINN, GARFIELD
Address: 505 S. PINE ISLAND RD, #209
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES:

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: GARFIELD PHINN

MGRM

04/04/2008

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