

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000056047

**FILED**  
**Jan 21, 2009**  
**Secretary of State**

**Entity Name:** MERCHANT LOGISTICS, LLC

**Current Principal Place of Business:**

1459 SW MERCHANT LANE  
PORT ST LUCIE, FL 34953 US

**New Principal Place of Business:**

574 SE CAPON TERRACE  
PORT ST LUCIE, FL 34983 US

**Current Mailing Address:**

POST OFFICE BOX 13863  
FORT PIERCE, FL 34979 US

**New Mailing Address:**

**FEI Number:** 26-0320689      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

BHOOPANDRA, PARAY  
1459 SW MERCHANT LANE  
PORT ST LUCIE, FL 34953 US

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

BHOOPANDRA, PARAY  
574 SE CAPON TERRACE  
PORT ST LUCIE, FL 34983 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: BHOOPANDRA PARAY

01/21/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: PARAY, SHANE  
Address: 574 SE CAPON TERR.  
City-St-Zip: PORT ST LUCIE, FL 34983 US

**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: SHANE PARAY

MGR

01/21/2009

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