

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000066301

FILED  
Jul 07, 2009  
Secretary of State

Entity Name: ZOLINE MINERAL RIGHTS, LLC

**Current Principal Place of Business:**

200 E DELAWARE PLACE APT 11F  
CHICAGO, IL 60611

**New Principal Place of Business:**

**Current Mailing Address:**

200 E DELAWARE PLACE APT 11F  
CHICAGO, IL 60611

**New Mailing Address:**

FEI Number: 90-0388458      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:**

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

ROBERT LEE SHAPIRO PA  
2401 PGA BLVD STE 272  
PALM BEACH GARDENS, FL 33410      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: BERGMAN, SOREL  
Address: 200 E DELAWARE PLACE APT 11F  
City-St-Zip: CHICAGO, IL 60611

Title: MGRM      ( ) Delete  
Name: ZELENKA, HARRIET E  
Address: 57 EAST DELAWARE PLACE APT 1001  
City-St-Zip: CHICAGO, IL 60611

**ADDITIONS/CHANGES:**

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: SOREL BERGMAN

MGRM

07/07/2009

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