

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000066860

FILED
Apr 30, 2008
Secretary of State

Entity Name: ALLIANCE LINEN SERVICE, LLC

Current Principal Place of Business:

1811 NORTH DIXIE HIGHWAY
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

1811 NORTH DIXIE HIGHWAY
WEST PALM BEACH, FL 33407

New Mailing Address:

80 MEAD STREET
DAYTON, OH 45402

FEI Number: 26-0454985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFITH, JOHN R ESQ.
C/O PETERSON & MYERS, P.A.
225 EAST LEMON STREET, SUITE 300
LAKELAND, FL 33802 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: () Delete
Name:
Address:
City-St-Zip:

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

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

ADDITIONS/CHANGES:

Title: MR () Change (X) Addition
Name: FELDMAN, BRUCE OFFICER
Address: 80 MEAD STREET
City-St-Zip: DAYTON, OH 45402

Title: MR () Change (X) Addition
Name: OSTROW, DOUGLAS OFFICER
Address: 80 MEAD STREET
City-St-Zip: DAYTON, OH 45402

Title: MR () Change (X) Addition
Name: RAPHAEL, BOB OFFICER
Address: 80 MEAD STREET
City-St-Zip: DAYTON, OH 45402

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: DEBORAH A TURCKES

CONT

04/30/2008

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