

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000068107

**FILED  
Apr 10, 2008  
Secretary of State**

**Entity Name:** MATTHIAS HOFMANN, LLC

**Current Principal Place of Business:**

8615 FLORIDA ROCK ROAD  
ORLANDO, FL 32824

**New Principal Place of Business:**

**Current Mailing Address:**

8615 FLORIDA ROCK ROAD  
ORLANDO, FL 32824

**New Mailing Address:**

**FEI Number:** 26-0476580      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MATTHIAS, HOFMANN  
8615 FLORIDA ROCK ROAD  
ORLANDO, FL 32824    US

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

HOFMANN, MATTHIAS  
8615 FLORIDA ROCK ROAD  
ORLANDO, FL FL    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: MATTHIAS HOFMANN      04/10/2008  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: MATTHIAS, HOFMANN  
Address: 8615 FLORIDA ROCK ROAD  
City-St-Zip: ORLANDO, FL 32824

**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: MATTHIAS HOFMANN      MGR      04/10/2008  
\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date