## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

	ANNUAL			<b>P</b>				
DOCUMENT # L07000069339  1. Entity Name KING JULIUS, LLC					O8 APA TALLAHAS	-4 AM	ED 18: 12	
Principal Place of Business 6600 N.W. 74TH AVENUE MIAMI, FL 33166		Mailing Address 6600 N.W. 74TH AVENU MIAMI, FL 33166	JE /			SEE, FL	STATE ORIDA INI III III III	<b>ar</b> i (il 1881)
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01172008	Chg-LLC	* CR2E	083 (12/06)	
City & State		City & State		4. FEt Numbe 65-09	932136			plied For t Applicable
Zip	Country	Zip	Country		of Status Desired		\$5.00 Add Fee Required	
6. Nam	e and Address of Current	Registered Agent		7. Name and	Address of New	Registered	Agent	
INTRASTATE REGISTERED AGENT CORPORATION % HOLLAND & KNIGHT LLP 701 BRICKELL AVENUE, SUITE 3000 MIAMI, FL 33131			Street Add	Name Corporation Service Company Street Address (P.O. Box Number is Not Acceptable)  1201 Hays Street  City Tallahassee  FL ZinCode 32301				
8. The above named entity somits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature. The above named entity somits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature. The above named entity somits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature. The above named entity somits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  Signature. The above named entity somition is applicable. (NOTE: Registered Agent signature)  DATE								
	FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75							
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			10.	-	Florid		ent of State	
After May 1, 2008	Fee will be \$538.75		NAME STREET ADDRESS	MGRM Kluger Far 6600 NW 74	Florid ADDITIONS nily Lim Ith Aven	ia Departm	Change	 ZAddition
9. TITLE NAME STREET ADDRESS	Fee will be \$538.75	RS/MANAGERS	NAME STREET ADDRESS	Kluger Far 6600 NW 74 Miami, FL	Florid ADDITIONS nily Lim Ith Aven	da Departm	Change	■ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Fee will be \$538.75	RS/MANAGERS Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Kluger Far 6600 NW 74 Miami, FL	ADDITIONS nily Lim 1th Aven 33166	da Departm	Change	■ Addition
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9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Fee will be \$538.75	RS/MANAGERS Delete  Delete  Delete  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Kluger Far 6600 NW 74 Miami, FL	ADDITIONS nily Lim 1th Aven 33166	da Departm	Change Change Change  Change  Change  Change	Addition  Addition

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OS APR	-4 PM 2:51
	IMENT OF STATE
REFERENCE : 515950 TAL44.	OF CORPORATIONS ASSEF, FLORIDA
AUTHORIZATION :	
COST LIMIT : \$ PRE-PAID	<b></b>
ORDER DATE : April 4, 2008	
ORDER TIME : 12:56 PM	08 SE TAL
ORDER NO. : 515950-025	CAR BY
CUSTOMER NO: 4144A	TARY ASS
CHANGE OF AGENT	AR 8: 17 OF STATE EEF FLORIDA
NAME: KING JULIUS, LLC	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY  XX PLAIN STAMPED COPY	
CONTACT PERSON: Kathy Drake EXT# 2959	