

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000084697

FILED
Apr 29, 2008
Secretary of State

Entity Name: ALL ABOUT TAILS PET SITTING, LLC

Current Principal Place of Business:

401 NORTH WICKHAM ROAD
SUITE N-111
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

401 NORTH WICKHAM ROAD
SUITE N-111
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COSTELLIC, CHRISTINA J
435 SEDGEWOOD CIRCLE
WEST MELBOURNE, FL 32904 US

Name and Address of New Registered Agent:

COSTELLIC, CHRISTINA J
3554 SOFT BREEZE CIRCLE
WEST MELBOURNE, FL 32904 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:

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: COSTELLIC, CHRISTINA J
Address: 435 SEDGEWOOD CIRCLE
City-St-Zip: WEST MELBOURNE, FL 32904

Title: MGR () Delete
Name: COSTELLIC, DARRELL J
Address: 435 SEDGEWOOD CIRCLE
City-St-Zip: WEST MELBOURNE, FL 32904

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: COSTELLIC, CHRISTINA J
Address: 3554 SOFT BREEZE CIRCLE
City-St-Zip: WEST MELBOURNE, FL 32904

Title: MGR (X) Change () Addition
Name: COSTELLIC, DARRELL J
Address: 3554 SOFT BREEZE CIRCLE
City-St-Zip: WEST MELBOURNE, FL 32904

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: CHRISTINA J COSTELLIC

MGR

04/29/2008

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