

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000092251

FILED
Oct 22, 2008
Secretary of State

Entity Name: GOLDEN SHIELD INSURANCE & TAGS LLC

Current Principal Place of Business:

2700 W ATLANTIC BLVD, STE 102A
POMPANO BEACH, FL 33069

New Principal Place of Business:

2700 W ATLANTIC BLVD, STE 100A
POMPANO BEACH, FL 33069

Current Mailing Address:

2700 W ATLANTIC BLVD, STE 102A
POMPANO BEACH, FL 33069

New Mailing Address:

2700 W ATLANTIC BLVD, STE 100A
POMPANO BEACH, FL 33069

FEI Number: 22-3968591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EDOUARD, KINSONN J
2700 W.ATLANTIC BLVD, STE 102A
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

EDOUARD, KINSONN J
2700 W.ATLANTIC BLVD, STE 100A
POMPANO BEACH, FL 33069 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:

10/22/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SIRIUS, STEPHANY J
Address: 4613 N. UNIVERSITY DR. #555
City-St-Zip: CORAL SPRINGS, FL 33067

Title: MGRM () Delete
Name: SIRIUS, SAMSON
Address: 4613 N UNIVERSITY DR #555
City-St-Zip: CORAL SPRINGS, FL 33067

Title: MGRM () Delete
Name: EDOUARD, KINSONN J
Address: 2700 WEST ATLANTIC BLVD. SUITE 102 A
City-St-Zip: POMPANO, FL 33069

Title: MGRM (X) Delete
Name: PIERRE, CARINE
Address: 1041 SEABROOK AVENUE
City-St-Zip: DAVIE, FL 33325

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: EDOUARD, KINSONN J
Address: 2700 WEST ATLANTIC BLVD. SUITE 100 A
City-St-Zip: POMPANO BEACH, FL 33069

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: STEPHANY J SIRIUS

MGRM

10/22/2008

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