

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000103151

Entity Name: ATARAXY, LLC

FILED
Jun 10, 2009
Secretary of State

Current Principal Place of Business:

3387 EAST LAKESHORE DRIVE, 2ND FLOOR
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

Current Mailing Address:

3387 EAST LAKESHORE DRIVE, 2ND FLOOR
TALLAHASSEE, FL 32312 US

New Mailing Address:

FEI Number: 26-1349230 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SACHS & SAX, P.A.
ATTN: M.B. ADELSON IV, ESQ.
310 WEST COLLEGE AVENUE, 3D FLOOR
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

LAW OFFICES OF M.B. ADELSON IV, P.A.
ATTN: M.B. ADELSON IV, ESQ.
310 WEST COLLEGE AVENUE, 3D FLOOR
TALLAHASSEE, FL 32301 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: M.B. ADELSON IV

06/10/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ADELSON, M B IV
Address: 3387 EAST LAKESHORE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: MGRM () Delete
Name: ADELSON, MARY L
Address: 3387 EAST LAKESHORE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: MGRM () Delete
Name: ADELSON, KAREN C
Address: 606 LOCUST ROAD
City-St-Zip: WILMETTE, IL 60091 US

ADDITIONS/CHANGES:

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

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

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: M.B. ADELSON IV

MGRM

06/10/2009

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