

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 14, 2008 8:00 am
Secretary of State

07-14-2008 90098 038 ***138.75

DOCUMENT # L07000105374						
1. Entity Name CAJUN INVASION LLC						
Principal Place of Business 4024 N DAVIS HWY PENSACOLA, FL 32503 US			Mailing Address 4024 N DAVIS HWY PENSACOLA, FL 32503 US			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State				
Zip	Country	Zip	Country	4. FEL Number 26-1126581		
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent KING, JAMES W JR 945 W MICHIGAN AVE 5B PENSACOLA, FL 32505			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City			
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. I am familiar with, and accept the obligations of registered agent.			DATE			
SIGNATURE (Signature required as printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when registering))			DATE			
FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008			In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		Make check payable to: Florida Department of State	
9. MANAGING MEMBERS/MANAGERS						
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete					
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete					
10. ADDITIONS/CHANGES						
Pres TERRA ORATOR 4024 N DAVIS HWY PENSACOLA, FL 32503						
☐ Change ☒ Addition						
☐ Change ☐ Addition						
☐ Change ☐ Addition						
☐ Change ☐ Addition						
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☐ Change ☐ Addition						
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:					Date: 7/5/08	