2008 LIMITED LIABILITY COMPANY ANNUAL REPORT.

FILED May 27, 2008 8:00 am Secretary of State 04-24-2008 90008 003 ***138.75

DOCUMENT # L07000125823 1. Erdity Name LET IT GROOM, LLC						04-24-20	008 90008 ()03 **	**138.75
Principal Place of Business Mailing Address 11 PINELEAF PASS 11 PINELEAF PASS DAVENPORT, FL 33897 DAVENPORT, FL 33897					30007637				
2. Principal Place of Business - No P.O. Box # 3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04092008	Chg-LLC	CR2E083 (12/06)	
City & State	6	City & State			4. EEI Numb	11 1 2 7 7 7	8		plied For Applicable
Ζiρ	Country Zip Co		Cour	itry	5. Certificate	of Status Desired		00 Add Require	
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New F	tegistered Agen	t	
STONE O	HADI OTTE C ESO			Name					
	HARLOTTE C ESQ. HWY 27 S. J			Street Address (P.O. Box Number is Not Acceptable)					
SEBRING,	FL 33870			City				Zip Code	
				Cky			FL ²	ap coo	•
SIGNATURE .	Sonature hoad or armed name of requiry of agent		DIE; Registeri	d Agent agneture requi	red when reinstang)		DATE		
Arter may	y 1, 2008 Fee will be \$538.7						a Department o	or surc	
9.	MANAGING MEMB		10.			ADDITIONS			
TITLE Name	MGRM BARBOSA, ANDREA A	☐ Deleta	TITL	I .				Change	Addition
STREET ADDRESS	11 PINELEAF PASS			EET ADORESS					
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NAME			NAM	ié EEI adoress					
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TIFLE		☐ Delete	TITE	.E				Change	Addition
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TITLE		☐ Deleta	167L	- I				Change	Addition
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CITY-ST-ZIP				-SI-EP					
TITLE		☐ Delete	in.	i i			0	Change	☐ Addition
NAME .	[MAA	Æ EET ADORESS					
STREET ACCRESS				EE1 ADURESS 1-ST-ZIP					
11. I hereby indicated	Learning that the information supplied with this report is true and accurate an ability company or the receiver or trust.	d that my signature shall hav	or the exe	emplions containe e legal effect as il	I made under cati	n; that I am a mana	urther certify that ging member or i	the info	rmation r of the
	TURE: 1/1/2					4/22/0	8		