

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000001255

FILED
Apr 14, 2009
Secretary of State

Entity Name: CERTIFIED EQUIPMENT SERVICE, LLC

Current Principal Place of Business:

1150 ARREDONDO STREET
NORTH PORT, FL 34286

New Principal Place of Business:

1150 ARREDONDO STREET
NORTH PORT, FL 34286 US

Current Mailing Address:

1150 ARREDONDO STREET
NORTH PORT, FL 34286

New Mailing Address:

FEI Number: 26-1674789 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PHILLIPS, RODNEY L JR.
1150 ARREDONDO STREET
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: P () Change (X) Addition
Name: PHILLIPS, RODNEY L JR
Address: 1150 ARREDONDO ST
City-St-Zip: NORTH PORT, FL 34286 US

Title: T () Change (X) Addition
Name: PHILLIPS, ROBIN A
Address: 1150 ARREDONDO ST
City-St-Zip: NORTH PORT, FL 34286 US

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: ROBIN A PHILLIPS

T

04/14/2009

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