

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000005739

Entity Name: A & M OUTFITTERS LLC

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

12273 COUNTY RD 137
WELLBORN, FL 32094 US

New Principal Place of Business:

12265 COUNTY ROAD 137
WELLBORN, FL 32094 US

Current Mailing Address:

12273 COUNTY RD 137
WELLBORN, FL 32094 US

New Mailing Address:

12265 COUNTY ROAD 137
WELLBORN, FL 32094 US

FEI Number: 26-1837506

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBERTS, NICHOLAS A
12273 COUNTY RD 137
WELLBORN, FL 32094 US

Name and Address of New Registered Agent:

ROBERTS, NICHOLAS A
12265 COUNTY ROAD 137
WELLBORN, FL 32094 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:

04/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ROBERTS, NICHOLAS A
Address: 12273 COUNTY RD 137
City-St-Zip: WELLBORN, FL 32094 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ROBERTS, NICHOLAS A
Address: 12265 COUNTY ROAD 137
City-St-Zip: WELLBORN, FL 32094 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: NICHOLAS A ROBERTS

MNGR

04/20/2009

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