

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000019604

Entity Name: VOVA IDA LLC

FILED
Apr 18, 2009
Secretary of State

Current Principal Place of Business:

240 N. COUNTY ROAD #203
PALM BEACH, FL 33480

New Principal Place of Business:

240 N. COUNTY ROAD
#203
PALM BEACH, FL 33480

Current Mailing Address:

240 N. COUNTY ROAD #203
PALM BEACH, FL 33480

New Mailing Address:

240 N. COUNTY ROAD
#203
PALM BEACH, FL 33480

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LASMEZAS, CORINNE
240 N. COUNTY ROAD #203
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

LASMEZAS, CORINNE
240 N. COUNTY ROAD
#203
PALM BEACH, FL 33480 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:

04/18/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LASMEZAS, CORINNE
Address: 240 N. COUNTY ROAD #203
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LASMEZAS, CORINNE
Address: 240 N. COUNTY ROAD #203
City-St-Zip: PALM BEACH, FL 33480

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: CORINNE LASMEZAS

MGR

04/18/2009

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