2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# L08000024576

Entity Name: OUR HOUSE YOUR HOME RENTALS LLC

Current Principal Place of Business:

4018 WILLOW LANE
MADISONVILLE, LA 70447

New Principal Place of Business:

12600 DEERFIELD PARKWAY
ALPHARETTA, GA 30004

Current Mailing Address:

4018 WILLOW LANE
MADISONVILLE, LA 70447

New Mailing Address:

3799 POPLAR SPRINGS RD
GAINESVILLE, GA 30507

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ABUSAID, JANET
319 W PARK AVE
TAMPA, FL 33602 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: MGRM ( ) Delete
Name: HURWITZ, RACHELLE
Address: 4018 WILLOW LANE
City-St-Zip: MADISONVILLE, LA 70447

Title: MGRM ( ) Delete
Name: HURWITZ, KEEFE
Address: 4018 WILLOW LANE
City-St-Zip: MADISONVILLE, LA 7044

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: HURWITZ, RACHELLE
Address: 12600 DEERFIELD PARKWAY
City-St-Zip: ALPHARETTA, GA 30004

Title: MGRM (X) Change ( ) Addition
Name: HURWITZ, KEEFE
Address: 12600 DEERFILED PARKWAY
City-St-Zip: ALPHARETTA, GA 30004

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: RACHELLE HURWITZ MGRM 04/17/2009

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