

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000034588

**FILED**  
**Feb 20, 2011**  
**Secretary of State**

**Entity Name:** BARE IT LLC

**Current Principal Place of Business:**

6714 DALI AVE  
A206  
LAND O LAKES, FL 34637 US

**New Principal Place of Business:**

**Current Mailing Address:**

6714 DALI AVE  
A206  
LAND O LAKES, FL 34637 US

**New Mailing Address:**

**FEI Number:** 41-2274898

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ALLEN, DOUGLAS F  
6714 DALI AVE  
A206  
LAND O LAKES, FL 34637 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  
**Name:** ALLEN, DOUGLAS F  
**Address:** 6714 DALI AVE A206  
**City-St-Zip:** LAND O LAKES, FL 34637

**Title:** MGRM  
**Name:** ALLEN, BARBARA A  
**Address:** 6714 DALI AVE A206  
**City-St-Zip:** LAND O LAKES, FL 34637

I hereby 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:** DOUGLAS F ALLEN

MGRM

02/20/2011

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