2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000036500

Entity Name: H. LEVINE, LLC

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4985 KINGSTON WAY NAPLES, FL 34119 US

Current Mailing Address: New Mailing Address:

4985 KINGSTON WAY NAPLES, FL 34119 US

FEI Number: 26-2381012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LEVINE, HAGER
4985 KINGSTON WAY
NAPLES, FL 34119 US
LEVINE, HEGER
4985 KINGSTON WAY
NAPLES, FL 34119 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: HEGER LEVINE 04/14/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 LEVINE, HAGER
 Name:
 LEVINE, HEGER

 Address:
 4985 KINGSTON WAY
 Address:
 4985 KINGSTON WAY

 City-St-Zip:
 NAPLES, FL 34119 US
 City-St-Zip:
 NAPLES, FL 34119 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: HEGER LEVINE MR 04/14/2009