2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000040916

Entity Name: MODA DIVAN L.L.C.

FILED Feb 05, 2009 Secretary of State

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

12012 SULA ST 5 NORTH FOREST AVE ORLANDO, FL 32837 5 NORTH FOREST AVE ORLANDO, FL 32803

Current Mailing Address: New Mailing Address:

12012 SULA ST 5 NORTH FOREST AVE ORLANDO, FL 32837 5 NORTH FOREST AVE

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

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

SMYTHE, KEVIN J
12012 SULA ST
ORLANDO, FL 32837 US
SMYTHE, KEVIN J
5 NORTH FOREST AVE
ORLANDO, FL 32803 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: KEVIN J SMYTHE 02/05/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 WAKEFIELD, SCOT D
 Name:
 SMYTHE, KEVIN J

 Address:
 PO BOX 770819
 Address:
 5 NORTH FOREST AVE

 City-St-Zip:
 ORLANDO, FL 32877
 City-St-Zip:
 ORLANDO, FL 32803

Title: MGRM (X) Delete Title: () Change () Addition Name: SMYTHE, KEVIN Name:

 Name:
 SMYTHE, KEVIN
 Name:

 Address:
 12012 SULA ST
 Address:

 City-St-Zip:
 ORLANDO, FL 32837
 City-St-Zip:

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: KEVIN J SMYTHE MGRM 02/05/2009