

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000042315

Entity Name: DESIGN OUTFITTERS, LLC

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

735 OSTEEN CEMETERY ROAD
DELTONA, FL 32738

New Principal Place of Business:

Current Mailing Address:

735 OSTEEN CEMETERY ROAD
DELTONA, FL 32738

New Mailing Address:

FEI Number: 26-2901925 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SHIVER, ROSALIND L
735 OSTEEN CEMETERY ROAD
DELTONA, FL FL US

Name and Address of New Registered Agent:

SHIVER, ROSALIND L
735 OSTEEN CEMETERY ROAD
DELTONA, FL 32738 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: ROSALIND L SHIVER

05/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: OWNE () Change (X) Addition
Name: SHIVER, ROSALIND L OWNER
Address: 735 OSTEEN CEMETERY ROAD
City-St-Zip: DELTONA, FL 32738 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: ROSALIND L SHIVER

OWNE

05/01/2009

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