

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000043922

FILED
Apr 29, 2009
Secretary of State

Entity Name: SALYNO LLC

Current Principal Place of Business:

3430 NW 5TH ST
FORT LAUDERDALE, FL 33311 US

New Principal Place of Business:

19419 VIA DEL MAR
APT 306
TAMPA, FL 33647 US

Current Mailing Address:

PO BOX 120205
FORT LAUDERDALE, FL 33312 US

New Mailing Address:

19419 VIA DEL MAR
APT 306
TAMPA, FL 33647 US

FEI Number: 26-2527495 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEAN-BAPTISTE, DIEUDONNÉ
3430 NW 5TH ST
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

JEAN-BAPTISTE, DIEUDONNÉ
19419 VIA DEL MAR
APT 306
TAMPA, FL 33647 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:

04/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JEAN-BAPTISTE, DIEUDONNÉ
Address: 3430 NW 5TH ST
City-St-Zip: FORT LAUDERDALE, FL 33311 US

Title: MGR (X) Delete
Name: MARIE, JEAN-BAPTISTE M
Address: 3430 NW 5TH ST
City-St-Zip: FORT LAUDERDALE, FL 33311 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: JEAN-BAPTISTE, DIEUDONNÉ
Address: 19419 VIA DEL MAR, APT 306
City-St-Zip: TAMPA, FL 33647 US

Title: () Change () Addition
Name:
Address:
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: DIEUDONNÉ JEAN-BAPTISTE

MGR

04/29/2009

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