2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000049508

Entity Name: QUEYLI TORRES LLC

City-St-Zip:

QUINCY, FL 32351

FILED May 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 58 SIOUX CIRCLE HAVANA, FL 32333 **Current Mailing Address: New Mailing Address:** P.O. BOX 2031 QUINCY, FL 32351 FEI Number: 26-2651993 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: Name and Address of New Registered Agent: BENFIELD, RON 58 SIOUX CIRCLE HAVANA, FL 32333 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition TORRES, QUEYLI Name: Name: Address: P.O. BOX 2031 Address: City-St-Zip: QUINCY, FL 32351 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HERNANDEZ, JUAN Name: Name: Address: P.O. BOX 2031 Address: City-St-Zip: QUINCY, FL 32351 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MONTES, OMAR Name: Name: Address: P.O. BOX 2031 Address:

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.

City-St-Zip:

SIGNATURE: QUEYLI TORRES MGRM 05/01/2009