

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000052261

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** SOUTHERN HANDLING & DELIVERY, LLC

**Current Principal Place of Business:**

2655 LEJEUNE ROAD  
SUITE 500  
CORAL GABLES, FL 331345832 US

**New Principal Place of Business:**

**Current Mailing Address:**

2655 LEJEUNE ROAD  
SUITE 500  
CORAL GABLES, FL 331345832 US

**New Mailing Address:**

**FEI Number:** 26-4245066

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVIDSON, HOLLYE  
2655 LEJEUNE ROAD  
SUITE 500  
CORAL GABLES, FL 331345832 US

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

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:**

Title: MGR  
Name: DAVIDSON, HOLLYE  
Address: 2655 LEJEUNE ROAD, SUITE 500  
City-St-Zip: CORAL GABLES, FL 331345832

I hereby 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: HOLLYE DAVIDSON

PRES

04/12/2011

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