

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000055317

FILED
Mar 09, 2009
Secretary of State

Entity Name: CELLAR 6, LLC

Current Principal Place of Business:

6 AVILES ST
ST AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

6 AVILES ST
ST AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 26-2728181

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEE, CRAIG
256 S. MATANZAS BLVD
ST AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

COLEE, CRAIG
6 AVILES ST
ST AUGUSTINE, FL 32084 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: CRAIG COLEE

03/09/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COLEE, CRAIG
Address: 256 S. MATANZAS BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MGRM () Delete
Name: ADDISON, THOMAS
Address: 224 N. FOREST DUNE DR
City-St-Zip: ST. AUGUSTINE, FL 32080

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COLEE, CRAIG
Address: 6 AVILES ST
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: MGRM (X) Change () Addition
Name: ROWELL, LEONARD
Address: 6 AVILES ST
City-St-Zip: ST. AUGUSTINE, FL 32084

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: CRAIG COLEE

MGR

03/09/2009

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