

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000056891

FILED
Aug 30, 2009
Secretary of State

Entity Name: MONASTERY OF THE GOOD SHEPHERD LLC

Current Principal Place of Business:

10900 NW 12 CT
MIAMI, FL 33167

New Principal Place of Business:

Current Mailing Address:

10900 NW 12 CT
MIAMI, FL 33167

New Mailing Address:

FEI Number: 80-0199131 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:

WALKER, ULYESSES
7520 NW 4TH AVE
MIAMI, FL 33167 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:

Title: P () Delete
Name: WALKER, ULYESSES
Address: 7520 NW 4TH AVE
City-St-Zip: MIAMI, FL 33150

Title: CFO () Delete
Name: KOWELES, ALICE
Address: 7520 NW 4TH AVE
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: UYSSSES WALKER

P

08/30/2009

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