

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000058740

Entity Name: TM II LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

369 MEADOW RIDGE DRIVE
TALLAHASSEE, FL 32312

New Principal Place of Business:

1140 CAPITAL CIRCLE SE
SUITE 1
TALLAHASSEE, FL 32301

Current Mailing Address:

369 MEADOW RIDGE DRIVE
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 26-2805340

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHAEL, TRACY
369 MEADOW RIDGE DRIVE
TALLAHASSEE, FL 32312 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: MGRM () Delete
Name: MICHAEL, TRACY
Address: 369 MEADOW RIDGE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: MORALES, TRACY
Address: 2659 EGRET COURT
City-St-Zip: TALLAHASSEE, FL 32308

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: TRACY MICHAEL

MGRM

04/28/2009

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