

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000059675

Entity Name: ASTONISH LLC

**FILED**  
**Mar 21, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

4452 WINTER OAKS LANE  
ORLANDO, FL 32812 US

**New Principal Place of Business:**

**Current Mailing Address:**

4452 WINTER OAKS LANE  
ORLANDO, FL 32812 US

**New Mailing Address:**

FEI Number: 26-2846254

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMALLBIZ AGENTS, LLC  
4244 W TENNESSEE ST. #185  
TALLAHASSEE, FL 32304 US

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

MARRERO, ARLENE  
4452 WINTER OAKS LANE  
ORLANDO, FL 32812 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: ARLENE MARRERO

03/21/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MARRERO, ARLENE  
Address: 4452 WINTER OAKS LANE  
City-St-Zip: ORLANDO, FL 32812 US

**ADDITIONS/CHANGES:**

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: ARLENE MARRERO

MGRM

03/21/2009

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