

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000068797

FILED
Jun 29, 2009
Secretary of State

Entity Name: PRAXIS WORKSHOP, LLC

Current Principal Place of Business:

525 EAST JACKSON STREET
403
ORLANDO, FL 32801

New Principal Place of Business:

525 EAST JACKSON STREET
404
ORLANDO, FL 32801

Current Mailing Address:

525 EAST JACKSON STREET
403
ORLANDO, FL 32801

New Mailing Address:

525 EAST JACKSON STREET
404
ORLANDO, FL 32801

FEI Number: 26-3010808 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:

LEON, ANDRES
525 EAST JACKSON STREET #403
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

LEON, ANDRES
525 EAST JACKSON STREET #404
ORLANDO, FL 32801 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: ANDRES LEON

06/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LEON, ANDRES
Address: 525 EAST JACKSON STREET #404
City-St-Zip: ORLANDO, FL 32801

Title: MGRM (X) Delete
Name: GUERRERO, VERONICA
Address: 525 EAST JACKSON STREET #403
City-St-Zip: ORLANDO, FL 32801

Title: MGRM (X) Delete
Name: BOLANOS, ALVARO
Address: 14-16 111TH STREET
City-St-Zip: COLLEGE POINT, NY 11356

ADDITIONS/CHANGES:

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

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: ANDRES LEON

MGR

06/29/2009

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