

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000072694

Entity Name: FAITH FLOORING, LLC

FILED  
Aug 06, 2009  
Secretary of State

## Current Principal Place of Business:

626 ST EDMUNDS LN  
ORLANDO, FL 32835

## New Principal Place of Business:

6135 METROWEST BLVD  
APT. 101  
ORLANDO, FL 32835

## Current Mailing Address:

626 ST EDMUNDS LN  
ORLANDO, FL 32835

## New Mailing Address:

6135 METROWEST BLVD  
APT. 101  
ORLANDO, FL 32835

FEI Number: 26-3080406      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:

DA SILVA AMPARO, FERNANDA  
626 ST EDMUNDS LN  
ORLANDO, FL 32835      US

## Name and Address of New Registered Agent:

DA SILVA AMPARO, FERNANDA  
6135 METROWEST BLVD  
APT. 101  
ORLANDO, FL 32835      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: FERNANDA DA SILVA AMPARO

08/06/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: DA SILVA AMPARO, FERNANDA  
Address: 626 ST EDMUNDS LN  
City-St-Zip: ORLANDO, FL 32835

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: DA SILVA AMPARO, FERNANDA  
Address: 6135 METROWEST BLVD APT. 101  
City-St-Zip: ORLANDO, FL 32835

Title: MGRM ( ) Change (X) Addition  
Name: ALVES, WESLEY A  
Address: 6135 METROWEST BLVD APT. 101  
City-St-Zip: ORLANDO, FL 32835

Title: MGRM ( ) Change (X) Addition  
Name: COSTA, EDELSON P  
Address: 6135 METROWEST BLVD APT. 101  
City-St-Zip: ORLANDO, FL 32835

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: FERNANDA DA SILVA AMPARO

MGRM

08/06/2009

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