

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000073869

Entity Name: R.O. CHEVELON, LLC

FILED
Sep 02, 2009
Secretary of State

Current Principal Place of Business:

405 US HIGHWAY 1
LAKE PARK, FL 33403

New Principal Place of Business:

Current Mailing Address:

405 US HIGHWAY 1
LAKE PARK, FL 33403

New Mailing Address:

FEI Number: 26-3153503 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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: MGR () Delete
Name: CHEVELON, EROLET
Address: 405 US HIGHWAY 1
City-St-Zip: LAKE PARK, FL 33403

Title: S () Delete
Name: CHEVELON, EROLET
Address: 405 US HIGHWAY 1
City-St-Zip: LAKE PARK, FL 33403

Title: MGR () Delete
Name: FENELUS, MERILES
Address: 15096 97TH RD N.
City-St-Zip: WEST PALM BEACH, FL 334121759

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: RO CHEVELON

MGR

09/02/2009

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