

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000075779

Entity Name: AJ DESIGNS, LLC

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2295 GULF OF MEXICO DRIVE, UNIT 102  
LONGBOAT KEY, FL 34228

**New Principal Place of Business:**

**Current Mailing Address:**

2295 GULF OF MEXICO DRIVE, UNIT 102  
LONGBOAT KEY, FL 34228

**New Mailing Address:**

FEI Number: 90-0451838

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHERWIN, ANDREW  
2295 GULF OF MEXICO DRIVE, UNIT 102  
LONGBOAT KEY, FL 34228 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: MPS  
Name: SHERWIN, ANDREW  
Address: 2295 GULF OF MEXICO DRIVE UNIT102  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: VT  
Name: SHERWIN, BARBARA  
Address: 2295 GULF OF MEXICO DRIVE UNIT 102  
City-St-Zip: LONGBOAT KEY, FL 34228

I hereby 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: ANDREW SHERWIN

MPS

04/25/2012

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