

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000077387

FILED
Apr 15, 2009
Secretary of State

Entity Name: EXORDIUM, LLC

Current Principal Place of Business:

3385 BURNS ROAD
208
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

4060 RCA BLVD
202
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

3385 BURNS ROAD
208
PALM BEACH GARDENS, FL 33410

New Mailing Address:

4060 RCA BLVD
202
PALM BEACH GARDENS, FL 33410

FEI Number: 80-0239315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWEN THOMAS ASHTON
3385 BURNS ROAD
208
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

ASHTON, OWEN T
1049 VINTNER BLVD
PALM BEACH GARDENS, FL 33410 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: OWEN THOMAS ASHTON

04/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ASHTON, OWEN T
Address: 3385 BURNS ROAD SUITE 208
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGRM (X) Delete
Name: COLLINS, SUSAN
Address: 3385 BURNS ROAD SUITE 208
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGRM (X) Delete
Name: HURWITZ, ADAM JASON
Address: 3385 BURNS ROAD SUITE 208
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGRM (X) Delete
Name: HURWITZ, ABBY CYD
Address: 3385 BURNS ROAD SUITE 208
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ASHTON, OWEN T
Address: 1049 VINTNER BLVD
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: OWEN THOMAS ASHTON

PRES

04/15/2009

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