

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000079448

**FILED**  
**May 03, 2010**  
**Secretary of State**

**Entity Name:** LTHM OHIO, LLC

**Current Principal Place of Business:**

13655 CARLTON DRIVE  
DAVIE, FL 33330

**New Principal Place of Business:**

**Current Mailing Address:**

13655 CARLTON DRIVE  
DAVIE, FL 33330

**New Mailing Address:**

**FEI Number:** 26-3266246      **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:**

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

CARUSO, DARREN V  
13655 CARLTON DRIVE  
DAVIE, FL 33330 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** CARUSO, DARREN V  
**Address:** 13655 CARLTON DRIVE  
**City-St-Zip:** DAVIE, FL 33330 US

**Title:** MGRM  
**Name:** STASSI, PETER  
**Address:** 5200 N FLAGLER DR  
**City-St-Zip:** WEST PALM BEACH, FL 33407 US

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:** DARREN V. CARUSO

MGRM

05/03/2010

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