

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000082530

Entity Name: KARIZMA BOUTIQUE, LLC

FILED  
Jul 20, 2009  
Secretary of State

**Current Principal Place of Business:**

3131 NW 13TH ST.  
5  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

3131 NW 13TH ST.  
5  
GAINESVILLE, FL 32601

**New Mailing Address:**

FEI Number: 26-3274064      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

RAWLS, MICKEY  
3131 NW 13TH ST.  
5  
GAINESVILLE, FL 32601 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 ( ) Delete  
Name: RAWLS, BLAIR  
Address: 3131 NW 13TH ST., SUITE 5  
City-St-Zip: GAINESVILLE, FL 32601

Title: MGR (X) Delete  
Name: VAUGHN, BRITNEY  
Address: 3131 NW 13TH ST., SUITE 5  
City-St-Zip: GAINESVILLE, GL 32601

**ADDITIONS/CHANGES:**

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: BLAIR N. RAWLS

MGRM

07/20/2009

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