

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000083306

FILED  
Jun 16, 2009  
Secretary of State

Entity Name: 2 LEFT SHOES, LLC

**Current Principal Place of Business:**

13244 POLO CLUB ROAD  
C 109  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

13244 POLO CLUB ROAD  
C 109  
WELLINGTON, FL 33414

**New Mailing Address:**

FEI Number: 26-3905059      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:**

GRISELLE, CHERNYS  
13244 POLO CLUB ROAD  
C 109  
WELLINGOTN, FL 33414 US

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

GRISELLE, CHERNYS  
13244 POLO CLUB ROAD  
C 109  
WELLINGTON, FL 33414 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: GRISELLE CHERNYS

06/16/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CHERNYS, GRISELLE  
Address: 13244 POLO CLUB ROAD C 109  
City-St-Zip: WELLINGTON, FL 33414

Title: MGR ( ) Delete  
Name: ROJAS-URRUTIA, FLORI  
Address: 200 ISLAND DRIVE  
City-St-Zip: KEY BISCAWAYNE, FL 33149

Title: MGR ( ) Delete  
Name: FELIZOLA, MARVIN  
Address: 16562 SW 97 TERRACE  
City-St-Zip: MIAMI, FL 33196

Title: MGR ( ) Delete  
Name: KOETZLE, TERESA  
Address: 200 ISLAND AVENUE  
City-St-Zip: KEY BISCAWAYNE, FL 33149

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: ROJAS-URRUTIA, FLOR  
Address: 200 ISLAND DRIVE  
City-St-Zip: KEY BISCAWAYNE, FL 33149

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: GRISELLE CHERNYS

MGR

06/16/2009

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