

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L08000090121

Entity Name: KOOLFAB, LLC

**FILED**  
**Oct 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

606 LANE AVENUE NORTH, STE 606-2  
JACKSONVILLE, FL 32254 US

**New Principal Place of Business:**

606 LANE AVENUE NORTH, STE 2  
JACKSONVILLE, FL 32254 US

**Current Mailing Address:**

606 LANE AVENUE NORTH, STE 606-2  
JACKSONVILLE, FL 32254 US

**New Mailing Address:**

606 LANE AVENUE NORTH, STE 2  
JACKSONVILLE, FL 32254 US

FEI Number: 38-3795037

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HERLONG, KEITH  
606 LANE AVENUE NORTH, STE 606-2  
JACKSONVILLE, FL 32254 US

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

HERLONG, KEITH  
606 LANE AVENUE NORTH, STE 2  
JACKSONVILLE, FL 32254 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

10/24/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HERLONG, KEITH  
Address: 606 LANE AVE NORTH STE 2  
City-St-Zip: JACKSONVILLE, FL 32254 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: KEITH HERLONG

MGRM

10/24/2012

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