

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000094317

Entity Name: ENDLESS START, LLC

**FILED**  
**Apr 15, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

10116 BROOKSVILLE LANE  
BOCA RATON, FL 33428

**New Principal Place of Business:**

**Current Mailing Address:**

10116 BROOKSVILLE LANE  
BOCA RATON, FL 33428

**New Mailing Address:**

FEI Number: 23-3663744

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALESSIO, INC  
1075 NE 99TH STREET  
MIAMI SHORES, FL 33138 US

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

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: PST ( ) Delete  
Name: GULLEN, CLAUDIA  
Address: 10116 BROOKSVILLE LANE  
City-St-Zip: BOCA RATON, FL 33428

**ADDITIONS/CHANGES:**

Title: PST (X) Change ( ) Addition  
Name: GUILLEN, CLAUDIA  
Address: 10116 BROOKSVILLE LANE  
City-St-Zip: BOCA RATON, FL 33428

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: CLAUDIA GUILLEN

PST

04/15/2009

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