

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000105695

FILED
Jan 20, 2009
Secretary of State

Entity Name: HALF, LLC

Current Principal Place of Business:

16520 NW 11 COURT
PEMBROKE PINES, FL 33028 US

New Principal Place of Business:

Current Mailing Address:

16520 NW 11 COURT
PEMBROKE PINES, FL 33028 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, KARLEEN E
16520 NW 11 COURT
PEMBROKE PINES, FL FL 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: MGR () Delete
Name: FOSTER, DERRICK F JR
Address: 16520 NW 11 COURT
City-St-Zip: PEMBROKE PINES, FL 33028 US

ADDITIONS/CHANGES:

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: DERRICK FOSTER, JR MGR 01/20/2009

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