

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000105827

FILED
Aug 30, 2009
Secretary of State

Entity Name: IRVING 1126 LLC

Current Principal Place of Business:

15841 PINES BLVD - # 130
PEMBROKE PINES, FL 33027

New Principal Place of Business:

Current Mailing Address:

15841 PINES BLVD - # 130
PEMBROKE PINES, FL 33027

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

Name and Address of New Registered Agent:

PITTER, ROBERT
15841 PINES BLVD - # 130
PEMBROKE PINES, FL 33027 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: MGR () Delete
Name: PITTER, ROBERT
Address: 5001 SW 201 TERR
City-St-Zip: FT LAUDERDALE, FL 33332

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: EGBERS, DENNIS W
Address: 14910 N ENCINO CIR
City-St-Zip: PEMBROKE PINES, FL 33027

Title: MGR () Change (X) Addition
Name: ARMONDA, JOSEPH
Address: 4658 NW 7TH PLACE
City-St-Zip: DEERFIELD BEACH, FL 33442

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: DENNIS EGBERS

MGR

08/30/2009

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