

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000105941

FILED  
Apr 05, 2011  
Secretary of State

**Entity Name:** BEST III INVESTMENTS, LLC

**Current Principal Place of Business:**

1633 EAST VINE STREET  
SUITE 106  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

**Current Mailing Address:**

1633 EAST VINE STREET  
SUITE 106  
KISSIMMEE, FL 34744

**New Mailing Address:**

**FEI Number:** 26-3719595

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PIEDRAHITA, LUZ  
1633 EAST VINE STREET  
SUITE 106  
KISSIMMEE, FL 34744 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  
Name: STORY, BENAJAMIN E  
Address: 2819 VIA LARGO COURT  
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM  
Name: STORY, DANIELA M  
Address: 2819 VIA LARGO COURT  
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM  
Name: STORY, MARIA A  
Address: 2819 VIA LARGO COURT  
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM  
Name: STORY, MARIA T  
Address: 2819 VIA LARGO COURT  
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM  
Name: PIEDRAHITA, LUZ M  
Address: 1633 E. VINE STREET #106  
City-St-Zip: KISSIMMEE, FL 34744

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: MARIA A STORY

MGRM

04/05/2011

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