

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000110957

Entity Name: MO TILE, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

10172 HOOVER STREET
SPRING HILL, FL 34608 US

New Principal Place of Business:

7513 HOLIDAY DRIVE
SPRING HILL, FL 34608 US

Current Mailing Address:

10172 HOOVER STREET
SPRING HILL, FL 34608 US

New Mailing Address:

7513 HOLIDAY DRIVE
SPRING HILL, FL 34608 US

FEI Number: 26-3804899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MINTZ, TERRY
10172 HOOVER STREET
SPRING HILL, FL 34608 US

Name and Address of New Registered Agent:

MINTZ, TERRY
7513 HOLIDAY DRIVE
SPRING HILL, FL 34606 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: TERRY MINTZ

04/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MINTZ, TERRY
Address: 10172 HOOVER STREET
City-St-Zip: SPRING HILL, FL 34608

Title: MGR () Delete
Name: MINTZ, REBECCA
Address: 10172 HOOVER STREET
City-St-Zip: SPRING HILL, FL 34608

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MINTZ, TERRY
Address: 7513 HOLIDAY DRIVE
City-St-Zip: SPRING HILL, FL 34606

Title: MGR (X) Change () Addition
Name: MINTZ, REBECCA
Address: 7513 HOLIDAY DRIVE
City-St-Zip: SPRING HILL, FL 34606

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: REBECCA MINTZ

MGR

04/29/2009

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