

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000111612

Entity Name: R. H. GONZALEZ, LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

3621 E AMANDA CT
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

3621 E AMANDA CT
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAMES A. NOLAN, P.A.
4114 HERSCHEL ST
STE 105
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

GONZALEZ, HECTOR
3621 E. AMANDA CT
JACKSONVILLE, FL 32259 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: HECTOR GONZALEZ

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GONZALEZ, HECTOR
Address: 3621 E AMANDA CT
City-St-Zip: JACKSONVILLE, FL 32259

Title: MGR () Delete
Name: GONZALEZ, REBECCA M
Address: 3621 E AMANDA CT
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES:

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

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: HECTOR GONZALEZ

MGR

04/28/2009

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