

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000112907

Entity Name: KLLG ENTERPRISES, LLC

FILED
Aug 31, 2009
Secretary of State

Current Principal Place of Business:

9768 WEST TERRY ST.
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

Current Mailing Address:

9768 WEST TERRY ST.
BONITA SPRINGS, FL 34135 US

New Mailing Address:

PO BOX 366637
BONITA SPRINGS, FL 34135 US

FEI Number: 26-3852197 FEI Number Applied For () 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:

JUAREZ, MARIO E CPA
6258 PRESIDENTIAL COURT
SUITE 102
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

JUAREZ, MARIO E CPA
15051 S TAMIAMI TRAIL SUITE
SUITE 203
FORT MYERS, FL 33908 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: LEODAN GONZALEZ

08/31/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: COM () Delete
Name: LIMA, KAROL
Address: 9768 W. TERRY STREET
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: MGRM () Delete
Name: GONZALEZ, LEODAN
Address: 1727 53RD LANE SW
City-St-Zip: NAPLES, FL 34116

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: LEODAN GONZALEZ

MGRM

08/31/2009

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