2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000115676

Entity Name: ATLANTIC HYDROPONICS, LLC

FILED Sep 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2 SYLVAN DRIVE 1535 CR 13A S

ST. AUGUSTINE, FL 32084 US ELKTON, FL 32033 US

Current Mailing Address: New Mailing Address:

2 SYLVAN DRIVE 1535 CR 13A S

ST. AUGUSTINE, FL 32084 US ELKTON, FL 32033 US

FEI Number: 32-0279748 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CARVALHO, SHELBY C CARVALHO, SHELBY C 2 SYLVAN DRIVE 1535 CR 13A S

ST. AUGUSTINE, FL 32084 US ELKTON, FL 32033 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.

MGRM

(X) Change () Addition

SIGNATURE: 09/19/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title:

Name: ATLANTIC HYDROPONICS HOLDING Name: ATLANTIC HYDROPONICS HOLDING
Address: 2 SYLVAN DRIVE Address: 1535 CR 13A S

City-St-Zip: ST AUGUSTINE, FL 32084 City-St-Zip: ELKTON, FL 32033

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 CARVALHO, SHELBY C
 Name:
 CARVALHO, SHELBY C

 Address:
 2 SYLVAN DRIVE
 Address:
 1535 CR 13A S

City-St-Zip: ST. AUGUSTINE, FL 32084 US City-St-Zip: ELKTON, FL 32033 US

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 CARVALHO, CHRISTOPHER P
 Name:

 Address:
 166 2ND AVE #7D
 Address:

 City-St-Zip:
 NEW YORK, NY 10003 US
 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: SHELBY CARVALHO MGR 09/19/2009