

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000116550

FILED
Jul 01, 2009
Secretary of State

Entity Name: CYPRESS GARDENS FLORIST LLC

Current Principal Place of Business:

1295 WEST 49 STREET
HIALEAH, FL 33010

New Principal Place of Business:

1295 WEST 49 STREET
HIALEAH, FL 33012

Current Mailing Address:

1295 WEST 49 STREET
HIALEAH, FL 33010

New Mailing Address:

1295 WEST 49 STREET
HIALEAH, FL 33012

FEI Number: 26-3925249 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

CAROLINA GAVILANES P.A.
10960 SW 71 LANE
MIAMI, FL 33173 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 () Delete
Name: GROSECLOSE, JACK
Address: 1295 WEST 49 STREET
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GROSECLOSE, JACK
Address: 1295 WEST 49 STREET
City-St-Zip: HIALEAH, FL 33012

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: JACK GROSECLOSE

MGR

07/01/2009

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