

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000007997

**FILED**  
**Feb 14, 2012**  
**Secretary of State**

**Entity Name:** BUTTERFLY IMPRESSIONS, LLC.

**Current Principal Place of Business:**

510 WITHERS COURT  
OCOE, FL 34761

**New Principal Place of Business:**

2407 ORSOTA CIRCLE  
OCOE, FL 34761

**Current Mailing Address:**

510 WITHERS COURT  
OCOE, FL 34761

**New Mailing Address:**

2407 ORSOTA CIRCLE  
OCOE, FL 34761

**FEI Number:** 26-4333944

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHULAK, VANESSA  
510 WITHERS COURT  
OCOE, FL 34761 US

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

CHULAK, VANESSA  
2407 ORSOTA CIRCLE  
OCOE, FL 34761 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: \_\_\_\_\_

02/14/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: CHULAK, VANESSA  
Address: 2407 ORSOTA CIRCLE  
City-St-Zip: OCOE, FL 34761

Title: MGRM  
Name: CHULAK, JAMY  
Address: 2407 ORSOTA CIRCLE  
City-St-Zip: OCOE, FL 34761

I hereby 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: JAMY CHULAK

MGRM

02/14/2012

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