

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000010707

**FILED**  
**Mar 27, 2011**  
**Secretary of State**

**Entity Name:** AMERICAN RESOLUTIONS,LLC

**Current Principal Place of Business:**

8 PINE BRANCH PLACE  
PALM COAST, FL 32164 US

**New Principal Place of Business:**

1 PINE BUSH N  
PALM COAST, FL 32164 US

**Current Mailing Address:**

PO BOX 351717  
PALM COST, FL 32135 US

**New Mailing Address:**

**FEI Number:** 26-4155688

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ABREU, KIMBERLY P  
8 PINE BRANCH PL  
PALM COAST,FL, FL 32164 US

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

ABREU, KIMBERLY P  
1 PINE BUSH LN  
PALM COAST,FL, FL 32164 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: KIMBERLY P ABREU

03/27/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ABREU, KIMBERLY P  
Address: 1 PINE BUSH LN  
City-St-Zip: PALM COAST, FL 32164

Title: MGRM  
Name: LA PIERRE, LINDA  
Address: 29 PINTO LN  
City-St-Zip: PALM COAST, FL 32164 US

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: KIMBERLY P ABREU

MGR

03/27/2011

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