

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000023865

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** IRVIN 2 ENTERPRISE LLC

**Current Principal Place of Business:**

7116 CORAL COVE DRIVE  
ORLANDO, FL 32818

**New Principal Place of Business:**

**Current Mailing Address:**

7116 CORAL COVE DRIVE  
ORLANDO, FL 32818

**New Mailing Address:**

P.O. BOX 680622  
ORLANDO, FL 32868

**FEI Number:** 27-0415290

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

IRVIN, DJUAN A  
7116 CORAL COVE DRIVE  
ORLANDO, FL 32818 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:** MGRM  
**Name:** IRVIN, DJUAN A  
**Address:** 7116 CORAL COVE DRIVE  
**City-St-Zip:** ORLANDO, FL 32818

**Title:** MGRM  
**Name:** IRVIN, GWENDOLYN M  
**Address:** 7116 CORAL COVE DRIVE  
**City-St-Zip:** ORLANDO, FL 32818

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:** DJUAN IRVIN

MGRM

04/30/2012

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