

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000060438

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** STUDIO 09, LLC

**Current Principal Place of Business:**

5050 BRADFORD RD  
JACKSONVILLE, FL 32217

**New Principal Place of Business:**

10274 BUCKHEAD BRANCH DR  
SUITE 119  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

5050 BRADFORD RD  
JACKSONVILLE, FL 32217

**New Mailing Address:**

10274 BUCKHEAD BRANCH DR  
SUITE 119  
JACKSONVILLE, FL 32246

FEI Number: 27-0408213

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TONUZI, FLORIAN  
5050 BRADFORD RD  
JACKSONVILLE, FL 32217 US

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

TONUZI, FLORIAN  
10274 BUCKHEAD BRANCH DR  
SUITE 119  
JACKSONVILLE, FL 32246 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: FLORIAN TONUZI

04/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: TONUZI, FLORIAN  
Address: 5050 BRADFORD RD  
City-St-Zip: JACKSONVILLE, FL 32217

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: FLORIAN TONUZI

MGRM

04/30/2010

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