

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000075716

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** AMERICAN CHOICE CARPET CARE, L.L.C

**Current Principal Place of Business:**

5234 BENNING ROAD  
JACKSONVILLE, FL 32254

**New Principal Place of Business:**

4769 SHIRLEY AVE  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

5234 BENNING ROAD  
JACKSONVILLE, FL 32254

**New Mailing Address:**

4769 SHIRLEY AVE  
JACKSONVILLE, FL 32210

**FEI Number:** 01-0929922

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HERNANDEZ, FLAVIA  
5234 BENNING ROAD  
JACKSONVILLE, FL 32254 US

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

HERNANDEZ, FLAVIA  
4769 SHIRLEY AVE  
JACKSONVILLE, FL 32210 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/29/2011

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HERNANDEZ, FLAVIA  
Address: 4769 SHIRLEY AVE  
City-St-Zip: JACKSONVILLE, FL 32210

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: FLAVIA HERNANDEZ

MGRM

04/29/2011

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