

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000092728

FILED  
Mar 29, 2012  
Secretary of State

Entity Name: HALVEN LLC

**Current Principal Place of Business:**

101 OCEAN LN DR  
#3012  
KEY BISCAVNE, FL 33149 US

**New Principal Place of Business:**

**Current Mailing Address:**

101 OCEAN LN DR  
#3012  
KEY BISCAVNE, FL 33149 US

**New Mailing Address:**

FEI Number: 80-0503768      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD.  
SUITE A-100  
TAMPA, FL 33612 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: HALVORSSSEN, ERIK L  
Address: 101 OCEAN LN DR #3012  
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: MGRM  
Name: DE HALVORSSSEN, ALEJANDRA P  
Address: 101 OCEAN LN DR #3012  
City-St-Zip: KEY BISCAVNE, FL 33149 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: ERIK L HALVORSSSEN      MGRM      03/29/2012

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