

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000106143

Entity Name: ALLERGYCARDS LLC

FILED
Apr 28, 2011
Secretary of State

Current Principal Place of Business:

3854 CEDAR HAMMOCK TRAIL
ST. CLOUD, FL 34772

New Principal Place of Business:

89 NEW RENFROE ST.
LEXINGTON, TN 38351

Current Mailing Address:

3854 CEDAR HAMMOCK TRAIL
ST. CLOUD, FL 34772

New Mailing Address:

89 NEW RENFROE ST.
LEXINGTON, TN 38351

FEI Number: 61-1613436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HINES, DANIEL T
3854 CEDAR HAMMOCK TRAIL
ST. CLOUD, FL 34772 US

Name and Address of New Registered Agent:

YOUR CAPITAL CONNECTION
417 E. VIRGINIA ST. STE. 1
TALLAHASSEE, FL 32301 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: BARBARA NEELEY

04/28/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: FIDDLER, DANIEL W
Address: 89 NEW RENFROE ST
City-St-Zip: LEXINGTON, TN 38351

Title: MGRM
Name: FIDDLER, SHERRY K
Address: 89 NEW RENFROE ST
City-St-Zip: LEXINGTON, TN 38351

Title: MGRM
Name: FIDDLER, JOHN A
Address: 1421 CLOVERDALE DR. APT 205
City-St-Zip: HIXSON, TN 37343

Title: MGRM
Name: FIDDLER, MARJORIE K
Address: 37 TEAKWOOD DR.
City-St-Zip: LEXINGTON, TN 38351

Title: MGRM
Name: FIDDLER, NATALIE C
Address: 1421 CLOVERDALE DR. APT 205
City-St-Zip: HIXSON, TN 37343

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: DANIEL FIDDLER

MGRM

04/28/2011

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