

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000035951

Entity Name: MARIKEN L.L.C.

**FILED**  
**Feb 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2014 ABBEY TRACE DRIVE  
DOVER, FL 33527

**New Principal Place of Business:**

**Current Mailing Address:**

2014 ABBEY TRACE DRIVE  
DOVER, FL 33527

**New Mailing Address:**

FEI Number: 27-3089663

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DALE, MARIAN  
2014 ABBEY TRACE DRIVE  
DOVER, FL 33527 US

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

INCRP SERVICES INC  
17888 67TH COURT NORTH  
LAXAHATCCHEE, FL 33470 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: CARRA DURRAN OBO INCRP SERVICES INC.

02/15/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DALE, MARIAN  
Address: 2014 ABBEY TRACE DRIVE  
City-St-Zip: DOVER, FL 33527

Title: MGRM  
Name: DALE, JAMES  
Address: 2014 ABBEY TRACE DRIVE  
City-St-Zip: DOVER, FL 33527

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: MARIAN J. DALE

MGRM

02/15/2011

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