

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000043109

Entity Name: FLIPMODE HOSPITALITY, LLC

FILED
Apr 12, 2011
Secretary of State

Current Principal Place of Business:

124 CALLE EL JARDIN
202
ST. AUGUSTINE, FL 32095 US

Current Mailing Address:

124 CALLE EL JARDIN
202
ST. AUGUSTINE, FL 32095 US

New Principal Place of Business:

1835 US1 SOUTH #119
322
ST. AUGUSTINE, FL 32084 US

New Mailing Address:

1835 US1 SOUTH #119
322
ST. AUGUSTINE, FL 32084 US

FEI Number: 27-2423294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JONES, JACQUELINE
1003 ALTARA AVENUE
SAINT AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

JONES, JACQUELINE
1835 US 1 SOUTH #119
322
SAINT AUGUSTINE, FL 32084 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:

04/12/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: JONES, JACQUELINE
Address: 1835 US 1 SOUTH #119 STE. 322
City-St-Zip: ST. AUGUSTINE, FL 32084 US

Title: MGRM
Name: WASHINGTON, CARLTON JR.
Address: 1835 US 1 SOUTH #119 STE. 322
City-St-Zip: ST. AUGUSTINE, FL 32084 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: JACQUELINE JONES

MGRM

04/12/2011

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