

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000094058

**FILED**  
**Aug 20, 2012**  
**Secretary of State**

**Entity Name:** LAST JOB, LLC

**Current Principal Place of Business:**

80450 OVERSEAS HWY  
107 B  
ISLAMORADA, FL 33036

**New Principal Place of Business:**

**Current Mailing Address:**

80450 OVERSEAS HWY  
107 B  
ISLAMORADA, FL 33036

**New Mailing Address:**

**FEI Number:** 27-5010877

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEROCHE, STEVE S  
80450 OVERSEAS HWY  
107 B  
ISLAMORADA, FL 33036 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:** DEROCHE, STEVE S  
**Address:** 80450 OVERSEAS HWY. APT. 107 B  
**City-St-Zip:** ISLAMORADA, FL 33036

**Title:** MGRM  
**Name:** WALSH, JOHN A  
**Address:** 80450 OVERSEAS HWY. APT. 107 B  
**City-St-Zip:** ISLAMORADA, FL 33036

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:** STEVE DEROCHE

MGMR

08/20/2012

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