

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000110655

Entity Name: FLOMOTION, LLC

FILED
Apr 25, 2011
Secretary of State

Current Principal Place of Business:

421 N. WOODLAND BLVD.
DELAND, FL 32723

New Principal Place of Business:

1982 STATE RD 44
244
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

421 N. WOODLAND BLVD.
DELAND, FL 32723

New Mailing Address:

1982 STATE RD 44
244
NEW SMYRNA BEACH, FL 32168

FEI Number: 27-3765386

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANTERS, CAMIEL M
421 N. WOODLAND BLVD.
DELAND, FL 32723 US

Name and Address of New Registered Agent:

GONZALEZ, MICHAEL K
1982 STATE RD 44
244
NEW SMYRNA BEACH, FL 32168 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: MICHAEL K GONZALEZ

04/25/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: OWNR
Name: TULLY, TIMOTHY J
Address: 639 MIDDLEBURY LOOP
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: OWNR
Name: GONZALEZ, MICHAEL K
Address: 1485 CANOPY LN APT 207
City-St-Zip: ORANGE CITY, FL 32763

Title: OWNR
Name: KINBERGER, SEAN R
Address: 207 9TH AVENUE NORTH APT 24
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: OWNR
Name: CANTERS, CAMIEL M
Address: 412 COLUMBUS AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: MICHAEL GONZALEZ

MNGR

04/25/2011

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