2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000116004

Entity Name: CARVELL ENTERPRISES, LLC

FILED Feb 17, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2135 HICKORY LANE 2135 HICKORY LANE

ORANGE PARK, FL 32073 ORANGE PARK, FL 32073 UN

Current Mailing Address: New Mailing Address:

2135 HICKORY LANE 2135 HICKORY LANE

ORANGE PARK, FL 32073 ORANGE PARK, FL 32073 UN

FEI Number: 27-3956135 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CARVELL, MELANIE J 2135 HICKORY LANE

ORANGE PARK, FL 32073 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM

Name: CARVELL, MELANIE J Address: 2135 HICKORY LANE City-St-Zip: ORANGE PARK, FL 32073 UN

Title: MGRM

 Name:
 CARVELL, MELANIE

 Address:
 2135 HICKORY LANE

 City-St-Zip:
 ORANGE PARK, FL 32073 UN

Title: MGRM

Name: CARVELL, MELANIE J Address: 2135 HICKORY LANE City-St-Zip: ORANGE PARK, FL 32073 UN

Title: MGRM

Name: CARVELL, MELANIE J Address: 2135 HICKORY LANE City-St-Zip: ORANGE PARK, FL 32073 UN

Title: MGRM

 Name:
 CARVELL, MELANIE J

 Address:
 2135 HICKORY LANE

 City-St-Zip:
 ORANGE PARK, FL 32073 UN

Title: MGRM

 Name:
 CARVELL, MELANIE J

 Address:
 2135 HICKORY LANE

 City-St-Zip:
 ORANGE PARK, FL 32073 UN

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 Statues.

SIGNATURE: MELANIE CARVELL MGRM 02/17/2011

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