

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000116972

Entity Name: LIVETHRULOCALS LLC

FILED
Apr 11, 2012
Secretary of State

Current Principal Place of Business:

11939 MARBON MEADOWS DR.
JACKSONVILLE, FL 32223

New Principal Place of Business:

2055 THOMASVILLE RD.
APT E205
TALLAHASSEE, FL 32308

Current Mailing Address:

11939 MARBON MEADOWS DR.
JACKSONVILLE, FL 32223

New Mailing Address:

2055 THOMASVILLE RD.
APT E205
TALLAHASSEE, FL 32308

FEI Number: 27-4009565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEGHETTO, KAITLYN R
11939 MARBON MEADOWS DR.
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

DEGHETTO, KAITLYN R
2055 THOMASVILLE RD.
APT E205
TALLAHASSEE, FL 32308 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: KAITLYN DEGHETTO

04/11/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: DEGHETTO, KAITLYN R
Address: 2055 THOMASVILLE RD. APT E205
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM
Name: BEEMAN, JOSEPH M
Address: 2055 THOMASVILLE RD. APT E205
City-St-Zip: TALLAHASSEE, FL 32308

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: KAITLYN DEGHETTO

MGRM

04/11/2012

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