

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000088670

**FILED**  
**Apr 06, 2012**  
**Secretary of State**

**Entity Name:** MOBILE PERSONAL ASSISTANT, LLC

**Current Principal Place of Business:**

2610 59TH ST  
SARASOTA, FL 34243 US

**New Principal Place of Business:**

**Current Mailing Address:**

2610 59TH ST  
SARASOTA, FL 34243 US

**New Mailing Address:**

**FEI Number:** 45-3131708

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRIDMAN, CASSIE L MS.  
2610 59TH ST  
SARASOTA, FL 34243 US

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

FRIEDMAN, CASSIE L MS.  
2610 59TH ST  
SARASOTA, FL 34243 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: CASSIE FRIEDMAN

04/06/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: FRIEDMAN, CASSIE L MS.  
Address: 2610 59TH ST  
City-St-Zip: SARASOTA, FL 34243 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: CASSIE FRIEDMAN

MGR

04/06/2012

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