

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000120846

FILED  
Apr 30, 2012  
Secretary of State

Entity Name: ADORN SALON LLC

**Current Principal Place of Business:**

3837 SOUTHSIDE BLVD  
5  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

3837 SOUTHSIDE BLVD  
5  
JACKSONVILLE, FL 32225

**New Mailing Address:**

FEI Number: 45-3664132

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JONES, ORAIN V SR.  
2710 N.E. 59TH ST  
GAINESVILLE, FL 32609 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: MGR  
Name: GRAHAM, ADRIANNE J  
Address: 2171 DERRINGER CIRC. E.  
City-St-Zip: JACKSONVILLE, FL 32225

Title: MGRM  
Name: GRAHAM, DEREK J  
Address: 2171 DERRINGER CIR. E.  
City-St-Zip: JACKSONVILLE, FL 32225

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: ADRIANNE GRAHAM

MGR

04/30/2012

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