2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# M03000003894

Entity Name: ARTIX ENTERTAINMENT, LLC

Current Principal Place of Business:

21760 SR 54
SUITE 101/102
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

PO BOX 2005
LAND O LAKES, FL 34639

New Mailing Address:

FEI Number: 20-0289308 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BOHN, ADAM L
24410 ROLLING VIEW COURT
LUTZ, FL 33559 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: MGRM ( ) Delete
Name: BOHN, ADAM L
Address: 24410 ROLLING VIEW COURT
City-St-Zip: LUTZ, FL 33559

Title: MGRM ( ) Delete
Name: BOHN, RODNEY C
Address: 6820 SOMBRAS WAY
City-St-Zip: LAND O LAKES, FL 34639

Title: MGRM ( ) Delete
Name: BOHN, DEBORAH A
Address: 6820 SOMBRAS WAY
City-St-Zip: LAND O LAKES, FL 34639

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DEBORAH A BOHN MGRM 02/05/2009

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