

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000001795

FILED
Apr 13, 2009
Secretary of State

Entity Name: ATLAS RECOVERY MANAGEMENT LLC

Current Principal Place of Business:

640 MENDELSSOHN AVE N
GOLDEN VALLEY, MN 55427

New Principal Place of Business:

Current Mailing Address:

640 MENDELSSOHN AVE N
GOLDEN VALLEY, MN 55427

New Mailing Address:

FEI Number: 26-0224027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MUSICH, RON
Address: 640 MENDELSSOHN AVE N
City-St-Zip: GOLDEN VALLEY, MN 55427

Title: MGRM () Delete
Name: JOHNSON, ADRIAN
Address: 715 FLORIDA AVE. S, SUITE 411
City-St-Zip: GOLDEN VALLEY, MN 55426

ADDITIONS/CHANGES:

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: RON MUSICH

PRES

04/13/2009

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