## H0900003826

	] "
(Requestor's Name)	
(Address)	  -
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	, c 19 <sup>4.9</sup> ×
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

L. SELLERS

APR 29 2010

**EXAMINER** 

Office Use Only



700177572567

04/27/10--01027--007 \*\*50.00

SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Timeless Enterprises, LLC d/b/a Repeatt.com  Name of Foreign Limited Liability Company			
Dear Sir or Madam:			
The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Peter Zimmerman			
Name of Person			
Timeless Enterprises, LLC d/b/a Repeatt.com			
Firm/Company			
1111 Brickell Bay Drive, #2410			
Address			
Miami, Florida			
City/State and Zip Code			
Peter@repeatt.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Peter Zimmerman at ( 917 ) 609-9604			
Name of Person Area Code and Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:   \$\sumset\$ \$\\$25 \text{ Filing Fee} \text{ \$\sumset\$ \$\\$30 \text{ Filing Fee & } \text{ \$\sumset\$ \$\sumset\$ \$\sumset\$ \$\sumset\$ \$\\$55.00 \text{ Filing Fee & }  \$\sumset\$ \$\			

## AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

4000

1. The name of the limited liability compar Department of State is: Timeless E	ny as it appears on the records of the nterprises, LLC d/b/a Repeatt.co	e Florida om	_ <del>.</del>
2. This entity was formed under the laws o	f: Delaware		<u>_</u> .
3. This entity was authorized to transact bu and its Florida document/registration number		9	<u></u>
4. The name and address of each manager	or managing member is as follows:		
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGRM	Peter Zimmerman 1111 Brickell Bay Drive, #2410 Miami, Florida 33131		<del></del>
MGRM	Alan Slewett P.O. Box 968 Hallandale, Florida 33008		<u>-</u> -
			<u> </u>
			<u> </u>
			110 APR 12
Required Signature: Signature of Manager,	, Managing Member or Member	AY OF ST	7 PH :

Filing Fee: \$25