

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000067884

Entity Name: RON'S WINDOW COVERING LLC.

Current Principal Place of Business:

648 LAKESIDE DRIVE
NORTH PALM BEACH, FL 33408

Current Mailing Address:

648 LAKESIDE DRIVE
NORTH PALM BEACH, FL 33408

FEI Number: 27-2971505

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOLYNEUX, RON
648 LAKESIDE DRIVE
NORTH PALM BEACH, FL 33408 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title	MGR	Title	BOSS
Name	MOLYNEUX, RON	Name	SMITH, SUZANNE S
Address	648 LAKESIDE DRIVE	Address	648 LAKESIDE DR
City-State-Zip:	NORTH PALM BEACH FL 33408	City-State-Zip:	NORTH PALM BEACH FL 33408

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RON MOLYNEUX

MGR

02/26/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date