2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2013
Secretary of State
CC3679097554

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Entity Name: TEARS OF JOY SEAMSTRESS SERVICES L.L.C.

Current Principal Place of Business:

4194 CONROY RD., SUITE 103
CASSELBERRY, FL 32839

Current Mailing Address:

4194 CONROY RD., SUITE 103
CASSELBERRY, FL 32839

FEI Number: 45-4348786

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, HOLLY
4194 CONROY RD., SUITE 103
CASSELBERRY, FL 32839 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
Name	SMITH, HOLLY
Address	4194 CONROY RD., SUITE 103
City-State-Zip:	CASSELBERRY FL 32839

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: HOLLY SMITH MANAGER 04/29/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date