2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 14, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000023234

1. Entity Name
EUROLINK AMERICA, LLC

Principal Place of Business
26691 ROOKERY LAKE DRIVE
BONITA SPRINGS, FL 34134

Mailing Address
26691 ROOKERY LAKE DRIVE
BONITA SPRINGS, FL 34134

09062006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0449161 | Applied For | Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

HUDSON, CRAIG J
26691 ROOKERY LAKE DRIVE
BONITA SPRINGS, FL 34134

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by September 15, 2006

U00000576793
03/14/06-80003-006 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	HUDSON, CRAIG J MR.
STREET ADDRESS	26691 ROOKERY LAKE DRIVE
CITY-ST-ZIP	BONITA SPRINGS, FL 34134
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____ 9-11-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #