## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000117221

Entity Name: DYNAMIC SOLUTIONS, LLC

FILED Apr 12, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

322 NANCY LYNN LANE, SUITE 1 322 NANCY LYNN LANE KNOXVILLE, TN 37919 SUITE 1

KNOXVILLE, TN 37919

Current Mailing Address: New Mailing Address:

322 NANCY LYNN LANE, SUITE 1 KNOXVILLE, TN 37919

FEI Number: 62-1651481 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WALLEN, CHRISTOPHER M 1601 BELVEDERE RD., SUITE 305-S WEST PALM BEACH, FL 33406 US WALLEN, CHRISTOPHER M 1601 BELVEDERE ROAD SUITE 305-S WEST PALM BEACH, FL 33406 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: 04/12/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WALLEN, JULIE A
 Name:

 Address:
 321 TOM FRANKLIN RD.
 Address:

 City-St-Zip:
 JEFFERSON CITY, TN 37760
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WALLEN, CHRISTOPHER M
 Name:

 Address:
 321 TOM FRANKLIN RD.
 Address:

 City-St-Zip:
 JEFFERSON CITY, TN 37760
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTOPHER M. WALLEN MR 04/12/2007