

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000117221

Entity Name: DYNAMIC SOLUTIONS, LLC

FILED
Apr 17, 2008
Secretary of State

Current Principal Place of Business:

322 NANCY LYNN LANE
SUITE 1
KNOXVILLE, TN 37919

New Principal Place of Business:

6421 DEANE HILL DRIVE
SUITE 1
KNOXVILLE, TN 37919

Current Mailing Address:

322 NANCY LYNN LANE, SUITE 1
KNOXVILLE, TN 37919

New Mailing Address:

6421 DEANE HILL DRIVE
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:

WALLEN, CHRISTOPHER M
1601 BELVEDERE ROAD
SUITE 305-S
WEST PALM BEACH, FL 33406 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WALLEN, JULIE A
Address: 321 TOM FRANKLIN RD.
City-St-Zip: JEFFERSON CITY, TN 37760

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Delete
Name: WALLEN, CHRISTOPHER M
Address: 321 TOM FRANKLIN RD.
City-St-Zip: JEFFERSON CITY, TN 37760

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JULIE A WALLEN

MGR

04/17/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date