

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000086689

FILED
Apr 29, 2008
Secretary of State

Entity Name: ALEOS GROUP, LLC

Current Principal Place of Business:

12152 BIG BAND CT
JACKSONVILLE, FL 32224 US

New Principal Place of Business:

Current Mailing Address:

12152 BIG BAND CT
JACKSONVILLE, FL 32224 US

New Mailing Address:

FEI Number: 26-0785009 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CONTEGA BUSINESS SERVICES LLC
ONE INDEPENDENT DRIVE
STE 1200
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

RIVERA, JOSE O MGR
12152 BIG BAND CT
JACKSONVILLE, FL 32224 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: JOSE O RIVERA

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MIESES, KAREM
Address: 12152 BIG BAND CT
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: MGRM () Delete
Name: MIESES, ALEXA
Address: 12152 BIG BAND CT
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGR () Change (X) Addition
Name: RIVERA, JOSE O
Address: 12152 BIG BAND CT
City-St-Zip: JACKSONVILLE, FL 32224

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: KAREM MIESES

MGRM

04/29/2008

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