2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L01000018053

Entity Name: IDENTIFICATION SERVICES L.L.C.

FILED May 02, 2008 Secretary of State

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

4028 LOGANS RUN TALLAHASSEE, FL 32309

Current Mailing Address: New Mailing Address:

4028 LOGANS RUN PO BOX 1142

TALLAHASSEE, FL 32309 MONTICELLO, FL 32345

FEI Number: 59-3753751 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:

MYERS, DEBRA J MYERS, DAVID C 4028 LOGANS RUN 4028 LOGANS RUN

TALLAHASSEE, FL 32309 US TALLAHASSEE, FL 32309 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: DAVID C. MYERS 05/02/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: CEO () Delete Title: CEO (X) Change () Addition Name: MYERS, DEBRA J CEO/OWN Name: MYERS, DAVID C OWNER

Address: 4028 LOGANS RUN Address: 4028 LOGANS RUN City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32309

Title: VP (X) Delete Title: () Change () Addition

 Name:
 MYERS, D VP
 Name:

 Address:
 PO BOX 1142
 Address:

 City-St-Zip:
 MONTICELLO, FL 32345
 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: DAVID C. MYERS OWNE 05/02/2008