2006 LIMITED LIABILITY COMPANY

FILED Apr 03, 2006 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # L02000006378 Entity Name IVY LEAGUE CONSULTING, LLC Principal Place of Business Malling Address **SUITE 405** SUITE 405 100 WEST GORE STREET 100 WEST GORE STREET ORLANDO, FL 32806 ORLANDO, FL 32806 01272006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 46-0488372 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LAMOY, PAMELA DO NOT WRITE SUITE 405 100 WEST GORE STREET IN THIS SPACE ORLANDO, FL 32806 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, 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 May 1, 2006 MANAGING MEMBERS/MANAGERS 9. 117) F NAME HUNTER, PATRICK T STREET ADDRESS STE 404 A 100 W GORE ST ORLANDO, FL 32806 CITY-ST-ZIP U00000490132 04/18/06-80044-007 50.00 TITLE NAME STREET ADDRESS C/TY-S7-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP D7LE

11. I hereby certify that the information supplied with this fitting 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 any 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 accurate this report as required by Chapter 608, Florida Statutes.

SIGNATURE: X

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED WALLE OF SYGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE