

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030323

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: HOME SOLUTIONS, LLC

**Current Principal Place of Business:**

465 OCEAN DR.  
905  
MIAMI BEACH, FL 33119

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 9663  
NAPERVILLE, IL 60567

**New Mailing Address:**

FEI Number: 52-2444788

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GIANNOTTI, CHRISTIAN  
465 OCEAN DR.  
905  
MIAMI BEACH, FL 33119 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: GIANNOTTI, CHRISTIAN  
Address: P.O. BOX 9663  
City-St-Zip: NAPERVILLE, IL 60567

**ADDITIONS/CHANGES:**

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: CHRISTIAN GIANNOTTI

CEO

04/28/2009

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