

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042304

FILED  
Jan 19, 2010  
Secretary of State

Entity Name: HHS, LLC

**Current Principal Place of Business:**

431 WESTERN AVE  
TOLEDO, OH 43609 US

**New Principal Place of Business:**

**Current Mailing Address:**

431 WESTERN AVE  
TOLEDO, OH 43609 US

**New Mailing Address:**

FEI Number: 83-0374622

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

HUFFMAN, RANDY L  
9160 NW 13TH ST  
PLANTATION, FL 33322 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: MGRM  
Name: HICKEY, DONALD K  
Address: 431 WESTERN AVE  
City-St-Zip: TOLEDO, OH 43609 US

Title: MGRM  
Name: HICKEY, JANET A  
Address: 431 WESTERN AVE  
City-St-Zip: TOLEDO, OH 43609 US

Title: MGRM  
Name: HUFFMAN, RANDY L  
Address: 9160 NW 13TH STREET  
City-St-Zip: PLANTATION, FL 33322 US

Title: MGRM  
Name: HUFFMAN, CAROL S  
Address: 9160 NW 13TH STREET  
City-St-Zip: PLANTATION, FL 33322 US

Title: MGRM  
Name: SMITH, STEVEN R  
Address: 523 CAMBRIDGE PARK SOUTH  
City-St-Zip: MAUMEE, OH 43537 US

Title: MGRM  
Name: SMITH, LINDA E  
Address: 523 CAMBRIDGE PARK SOUTH  
City-St-Zip: MAUMEE, OH 43537 US

I hereby 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: STEVEN R. SMITH

MGRM

01/19/2010

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