2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056782

Entity Name: TOTAL COVERAGE LLC

FILED Apr 29, 2009 Secretary of State

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

295 WILSON AVENUE

SATELLITE BEACH, FL 32937 US

Current Mailing Address: New Mailing Address:

295 WILSON AVENUE

SATELLITE BEACH, FL 32937 US

FEI Number: 06-1736618 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:

MOORE, TRE S 295 WILSON AVENUE

SATELLITE BEACH, FL 32937 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 MOORE, TRE S
 Name:

 Address:
 295 WILSON AVENUE
 Address:

 City-St-Zip:
 SATELLITE BEACH, FL 32937 US
 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: MOORE, TRE S MGR 04/29/2009