2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000002510

Entity Name: H2O SOLUTIONS, LLC

FILED Jun 04, 2007 Secretary of State

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

PO BOX 551669 665 GROVE PARK BLVD

JACKSONVILLE, FL 32255 US JACKSONVILLE, FL 32216 US

Current Mailing Address: New Mailing Address:

PO BOX 551669 665 GROVE PARK BLVD

JACKSONVILLE, FL 32255 US JACKSONVILLE, FL 32216 US

FEI Number: 33-1081636 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

CAMPBELL, SCOTT E CAMPBELL, SCOTT E PO BOX 551669 CAMPBELL, SCOTT E 665 GROVE PARK BLVD

JACKSONVILLE, FL 32255 US JACKSONVILLE, FL 32216 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: 06/04/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 CAMPBELL, SCOTT E
 Name:
 CAMPBELL, SCOTT E

 Address:
 PO BOX 551669
 Address:
 665 GROVE PARK BLVD

 City-St-Zip:
 JACKSONVILLE, FL 32255 US
 City-St-Zip:
 JACKSONVILLE, FL 32216 US

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: SCOTT E. CAMPBELL MGR 06/04/2007