

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000017621

Entity Name: DIOMO SOLUTIONS, LLC

FILED
Jul 22, 2008
Secretary of State

Current Principal Place of Business:

5400 NW 21ST TERRACE
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

5101 NW 21ST AVENUE
SUITE 300
FORT LAUDERDALE, FL 33309

Current Mailing Address:

5400 NW 21ST TERRACE
FORT LAUDERDALE, FL 33309

New Mailing Address:

5101 NW 21ST AVENUE
SUITE 300
FORT LAUDERDALE, FL 33309

FEI Number: 20-1076806 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:

GARELLEK, STEVEN
BERGER SINGERMANN
2650 N. MILITARY TRAIL
BOCA RATON, FL 33431 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: TATE, JOHN
Address: 2650 N. MILITARY TRAIL SUITE 240
City-St-Zip: BOCA RATON, FL 33431

Title: MGR () Delete
Name: CARRION, ALEJANDRO
Address: 2650 N. MILITARY TRAIL SUITE 240
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RICHARD PARKER

PRES

07/22/2008

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