

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000044653

Entity Name: CLOUD8, L.L.C.

FILED
Jul 03, 2008
Secretary of State

Current Principal Place of Business:

9054 FOXWOOD DR.
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

9054 FOXWOOD DR.
TALLAHASSEE, FL 32309

New Mailing Address:

PO BOX 14902
TALLAHASSEE, FL 32317

FEI Number: 20-1530100 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:

LEALE, JOHN
9054 FOXWOOD DR
TALLAHASSEE, FL 32309 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 () Delete
Name: LEALE, JOHN
Address: 9054 FOXWOOD DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM (X) Delete
Name: FORTNEY, MARCEL
Address: 1435 RIDGE RD
City-St-Zip: TEMPLETON, CA 93465

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: JOHN LEALE

MGRM

07/03/2008

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