

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056641

Entity Name: MEDDEX SOLUTIONS, LLC

FILED
Apr 05, 2009
Secretary of State

Current Principal Place of Business:

670 N. ORLANDO AVENUE, SUITE 202
MAITLAND, FL 32751 US

New Principal Place of Business:

670 N. ORLANDO AVENUE
SUITE 202
MAITLAND, FL 32751 US

Current Mailing Address:

670 N. ORLANDO AVENUE, SUITE 202
MAITLAND, FL 32751 US

New Mailing Address:

670 N. ORLANDO AVENUE
SUITE 202
MAITLAND, FL 32751 US

FEI Number: 80-0116432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POINDEXTER, DEBORAH S
670 N. ORLANDO AVENUE, SUITE 202
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

POINDEXTER, DEBORAH S
670 N. ORLANDO AVENUE
SUITE 202
MAITLAND, FL 32751 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:

04/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: POINDEXTER, JEFFREY S
Address: 1065 GREGORY DRIVE
City-St-Zip: MAITLAND, FL 32751 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: POINDEXTER, JEFFREY S
Address: 670 N. ORLANDO AVENUE, SUITE 202
City-St-Zip: MAITLAND, FL 32751 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: JEFFREY S. POINDEXTER

MGRM

04/05/2009

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