2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000061669

Entity Name: SOUTHERN SOLUTIONS GROUP, LLC

FILED Apr 29, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
|--------------------------------------|---------------------------------|

8105 COCONUT PALM WAY 3801 NW 97TH AVE. SUITE # 302 SUITE 400

KISSIMMEE, FL 34747 DORAL, FL 33178

Current Mailing Address: New Mailing Address:

8105 COCONUT PALM WAY 3801 NW 97TH AVE. SUITE # 302 SUITE 400 DORAL, FL 33178

FEI Number: 20-1513181 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:

FRANSEZZE, ALBERTO M 8105 COCONUT PALM WAY SUITE 302 KISSIMMEE, FL 34747 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:
 FRANSEZZE, ÅLBERTO M
 Name:

 Address:
 8105 COCONUT PALM WAY, SUITE 302
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34747
 City-St-Zip:

Title: SECR () Delete Title: () Change () Addition

 Name:
 RIGOTTI, ROXANA A
 Name:

 Address:
 8105 COCONUT PALM WAY, SUITE 302
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34747
 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: ALBERTO M. FRANSEZZE MGR 04/29/2009