

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000087008

Entity Name: SUNSHINE STATE SOLUTIONS, LLC

FILED
Feb 09, 2006
Secretary of State

Current Principal Place of Business:

1293 BEAR RUN BLVD
ORANGE PARK, FL 32065 US

New Principal Place of Business:

5371 ELM COURT
ORLANDO, FL 32811 US

Current Mailing Address:

1293 BEAR RUN BLVD
ORANGE PARK, FL 32065 US

New Mailing Address:

5371 ELM COURT
ORLANDO, FL 32811 US

FEI Number: 20-1954101

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMBERT, CATHERINE
1293 BEAR RUN BLVD
ORANGE PARK, FL 32065 US

Name and Address of New Registered Agent:

LAMBERT, CATHERINE
5371 ELM COURT
ORLANDO, FL 32811 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: CATHERINE LAMBERT

02/09/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LAMBERT, CATHERINE L
Address: 1293 BEAR RUN BLVD
City-St-Zip: ORANGE PARK, FL 32065 US

Title: MGRM (X) Delete
Name: MALPARTIDA, JOSE R
Address: 1293 BEAR RUN BLVD
City-St-Zip: ORANGE PARK, FL 32065 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LAMBERT, CATHERINE L
Address: 5371 ELM COURT
City-St-Zip: ORLANDO, FL 32811 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CATHERINE LAMBERT

MGRM

02/09/2006

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