

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000090569

Entity Name: MORTGAGE SOLUTIONS LLC

FILED
Jan 19, 2009
Secretary of State

Current Principal Place of Business:

24546 SW 108 PLACE
HOMESTEAD, FL 33032

New Principal Place of Business:

Current Mailing Address:

24546 SW 108 PLACE
HOMESTEAD, FL 33032

New Mailing Address:

FEI Number: 43-2069396

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUSBANDS, PAULINE
24546 SW 108 PLACE
HOMESTEAD, FL 331032 US

Name and Address of New Registered Agent:

ALABRE, JACQUES
24546 SW 108 PLACE
HOMESTEAD, FL 331032 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: JACQUES ALABRE

01/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HUSBANDS, PAULINE
Address: 24546 SW 108 PLACE
City-St-Zip: HOMESTEAD, FL 33032

Title: MGR (X) Delete
Name: ALABRE, JACQUES
Address: 24546 SW 108 PLACE
City-St-Zip: HOMESTEAD, FL 33032

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ALABRE, JACQUES
Address: 24546 SW 108 PLACE
City-St-Zip: HOMESTEAD, FL 33032

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: JACQUES ALABRE

MGR

01/19/2009

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