2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025584

Address:

City-St-Zip:

2014 BRENTWOOD DR.

AUBURNDALE, FL 33823

Entity Name: HOUSING SOLUTIONS, LLC

FILED May 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2014 BRENTWOOD DR C/O 2014 BRENTWOOD DR. AUBURNDALE, FL 33823 US AUBURNDALE, FL 33823 **Current Mailing Address: New Mailing Address:** C/O 2014 BRENTWOOD DR. 2014 BRENTWOOD DR AUBURNDALE, FL 33823 US AUBURNDALE, FL 33823 FEI Number: 05-0621981 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: Name and Address of New Registered Agent: KONECTUS, LLC 2014 BRENTWOOD DRIVE AUBURNDALE, FL 33823 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: () Change () Addition () Delete FOLKERTS, JANET Name: Name: Address: 2014 BRENTWOOD DRIVE Address: City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: JANET FAYE FOLKERTS, TRUST 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: JANET FOLKERTS MRG 05/22/2008