2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000062939

1. Entity Name

ALEXIS CAPITAL, LLC

Principal Place of Business

1618 MAHAN CENTER BLVD.

STE. 103

TALLAHASSEE, FL 32308

Mailing Address

1618 MAHAN CENTER BLVD.

STE. 103

DO NOT WRITE IN THIS SPACE

TALLAHASSEE, FL 32308



04172007 No Chg-LLC

CR2E083 (11/05)

FILED

Apr 23, 2007 08:00 A Secretary of State

4. FEI Number	App	olied For
20-13768 <u>85</u>	Not	Applicable
5. Certificate of Status Desired	\$5.00 Additional	

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered egent and title if applicable.

MANAGING MEMBERS/MANAGERS

PALMER, WALDO H JR. 1618 MAHAN CENTER BLVD. STE. 103 TALLAHASSEE, FL 32308

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8.	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. I am familiar with, and accept
	the obligations of registered agent.
	• •
SI	GNATURE

(NOTE: Registered Agen) signature required when reinstating)

9

Filing Fee is \$50.00 Due by May 1, 2007

<i>a.</i>	MAN TOUT OF THE PROPERTY OF THE		
TITLE	MGR		
NAME	DEAN, ROBERT C		
STREET AODRESS			
CITY-ST-ZIP	TALLAHASSEE, FL 32308		
TITLE	MGR		
NAME	PALMER, WALDO H JR.		
STREET ADDRESS	1618 MAHAN CENTER BLVD. STE. 103		
CITY-ST-ZIP	TALLAHASSEE, FL 32308		
TITLE			
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CITY-ST-ZIP			
011-31-51	<u> </u>		

. 105/03/07-80004-011 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

SIC	ANE	TURE:
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/20/07

Daytime Phor