2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064500

Entity Name: RENTBLURB, LLC

FILED Jan 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

25220 IRONWEDGE DRIVE 6420 WAVELAND DRIVE SORRENTO, FL 32776 CUMMING, GA 30040

Current Mailing Address: New Mailing Address:

PO BOX 471411 PO BOX 2372

LAKE MONROE, FL 327471411 CUMMING, GA 30028

FEI Number: 76-0767715 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:

HASSEN, AARON E
25220 IRONWEDGE DRIVE
SORRENTO, FL 32776 US
HASSEN, AARON E
6420 WAVELAND DRIVE
CUMMING, FL 30028 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: AARON E. HASSEN 01/18/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 HASSEN, AARON E
 Name:
 HASSEN, AARON E

 Address:
 25220 IRONWEDGE DRIVE
 Address:
 6420 WAVELAND DRIVE

 City-St-Zip:
 SORRENTO, FL 32776
 City-St-Zip:
 CUMMING, GA 30040

Title: MGR () Delete Title: MGR (X) Change () Addition Name: HASSEN, JENNIFER Name: HASSEN, JENNIFER

Address: 25220 IRONWEDGE DRIVE Address: 6420 WAVELAND DRIVE
City-St-Zip: SORRENTO, FL 32776 City-St-Zip: CUMMING, GA 30040

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: AARON E. HASSEN MGRM 01/18/2006