

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000085293

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** ASSET LYNX, LLC

**Current Principal Place of Business:**

145 NORTH GROVE STREET  
MERRITT ISLAND, FL 32953 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 361436  
MELBOURNE, FL 329361436 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RENEE, PFEILSTICKER  
145 NORTH GROVE STREET  
MERRITT ISLAND, FL 32953 US

**Name and Address of New Registered Agent:**

TRINA, NUNLEY  
145 NORTH GROVE STREET  
MERRITT ISLAND, FL 32953 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: TRINA NUNLEY

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: TRINA, NUNLEY  
Address: 145 NORTH GROVE STREET  
City-St-Zip: MERRITT ISLAND, FL 32953 US

I hereby 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: TRINA NUNLEY

MGR

04/30/2012

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