2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000085418

Entity Name: THE LAUNCH PAD, LLC

FILED Jan 29, 2008 Secretary of State

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

1476 N. GOLDENROD RD. SUITE 340 ORLANDO, FL 32807 U

Current Mailing Address: New Mailing Address:

1476 N. GOLDENROD RD. SUITE 340 ORLANDO, FL 32807 US

FEI Number: 20-3389593 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:

SNIPES, AARON H 1476 N. GOLDENROD RD. SUITE 340 ORLANDO, FL 32807 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: MR () Delete Title: () Change () Addition

 Name:
 PETERSEN, CHRIS
 Name:

 Address:
 1476 N. GOLDENROD RD. SUITE 340
 Address:

 City-St-Zip:
 ORLANDO, FL 32807
 City-St-Zip:

Title: MR () Delete Title: () Change () Addition

 Name:
 RYAN, PETERSEN
 Name:

 Address:
 1476 N GOLDENROD RD #340
 Address:

 City-St-Zip:
 ORLANDO, FL 32807
 City-St-Zip:

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

Name: Name: AARON, SNIPES

Address: Address: 1476 N GOLDENROD RD #340

City-St-Zip: City-St-Zip: ORLANDO, FL 32807

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: AARON SNIPES MGRM 01/29/2008