

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098953

FILED
Apr 24, 2009
Secretary of State

Entity Name: TOTAL SERVER SOLUTIONS L.L.C.

Current Principal Place of Business:

3015 PINE ISLAND ROAD, S.W., STE. 113-274
CAPE CORAL, FL 33915

New Principal Place of Business:

Current Mailing Address:

3015 PINE ISLAND ROAD, S.W., STE. 113-274
CAPE CORAL, FL 33915

New Mailing Address:

FEI Number: 16-1742051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMAT, GARY
3015 PINE ISLAND ROAD, S.W., STE. 113-274
CAPE CORAL, FL 33915 US

Name and Address of New Registered Agent:

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:

Title: MGRM () Delete
Name: SIMAT INC.
Address: 3015 PINE ISLAND ROAD, S.W., STE. 113-274
City-St-Zip: CAPE CORAL, FL 33915

Title: MGRM () Delete
Name: CARLUCCIO SAPRIZA, CARLOS I
Address: JOSE MARTI 3214
City-St-Zip: MONTEVIDEO, URUGUAY 113000,

Title: MGRM () Delete
Name: MALDONADO BRICENO, CARLOS R
Address: RES. LA HACIENDA, TORRE D, APT. A-41
City-St-Zip: SAN CRISTOBAL, TACH, VENEZUELA,

Title: MGRM () Delete
Name: JOHN WIGLE ENTERPRISES INC.
Address: 10207 MERREDITH CIRCLE APT 308
City-St-Zip: BURKE, VA 22015

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SIMAT, GARY
Address: 3015 PINE ISLAND ROAD, S.W., STE. 113-274
City-St-Zip: CAPE CORAL, FL 33915

Title: MGRM (X) Change () Addition
Name: WIGLE, JOHN G JR.
Address: 10207 MERREDITH CIRCLE APT 308
City-St-Zip: BURKE, VA 22015

Title: MGRM (X) Change () Addition
Name: PUENTE BEACH INC
Address: WICKHAMS CAY, P.O. BOX 662
City-St-Zip: WANCHESE, NC 27981

Title: () Change () Addition
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: GARY SIMAT

MGRM

04/24/2009

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