

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000017296

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: SOURCELOGIC IT SERVICES, LLC

**Current Principal Place of Business:**

1393 WEST BROADWAY STREET  
OVIEDO, FL 32765

**New Principal Place of Business:**

102 ARROWHEAD COURT  
WINTER SPRINGS, FL 32708

**Current Mailing Address:**

1393 WEST BROADWAY STREET  
OVIEDO, FL 32765

**New Mailing Address:**

102 ARROWHEAD COURT  
WINTER SPRINGS, FL 32708

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

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

AJAYI, RICHARD A  
1393 WEST BROADWAY STREET  
OVIEDO, FL 32765 US

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

AJAYI, RICHARD A  
102 ARROWHEAD COURT  
WINTER SPRINGS, FL 32708 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: RICHARD AJAYI

04/24/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: AJAYI, RICHARD A  
Address: 102 ARROWHEAD COURT  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: MGRM ( ) Delete  
Name: DHAR, ASHISH  
Address: 102 SOUTH SYCAMORE STREET, SUITE 1101  
City-St-Zip: CHARLOTTE, NC 28202

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RICHARD AJAYI

MGRM

04/24/2007

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