

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000024635

FILED
May 02, 2008
Secretary of State

Entity Name: EQUITY ONE SOLUTIONS, LLC

Current Principal Place of Business:

8291 DAMES POINT CROSSING BLVD
4312
JACKSONVILLE, FL 32277

New Principal Place of Business:

Current Mailing Address:

8291 DAMES POINT CROSSING BLVD
4312
JACKSONVILLE, FL 32277

New Mailing Address:

FEI Number: 20-4450932 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

TOURE, CHANDRA L
8291 DAMES POINT CROSSING BLVD
4312
JACKSONVILLE, FL 32277 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:

Title: MGR () Delete
Name: EQUITRADE CORP.,
Address: 11794 DONATO DRIVE
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: MGR (X) Delete
Name: TOURE, CHANDRA L
Address: 8291 DAMES POINT CROSSING BLVD #4312
City-St-Zip: JACKSONVILLE, FL 32277 US

Title: MGR (X) Delete
Name: TOURE, DJIBRIL
Address: 11794 DONATO DRIVE
City-St-Zip: JACKSONVILLE, FL 32226 US

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: TOURE, CHANDRA L
Address: 8291 DAMES PT CROSSING BLVD N #4312
City-St-Zip: JACKSONVILLE, FL 32277 US

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 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: CHANDRA L. TOURE

P

05/02/2008

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