

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000024835

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** SYMBIOTIC SERVICES, L.L.C.

**Current Principal Place of Business:**

625 WALTHAM AVENUE  
SUITE 108  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 593082  
ORLANDO, FL 32859

**New Mailing Address:**

**FEI Number:** 20-4500117

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRANKEL, CLAY  
625 WALTHAM AVENUE  
SUITE 108  
ORLANDO, FL 32809 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:** MGR  
**Name:** FRANKEL, CLAY  
**Address:** P.O. BOX 593082  
**City-St-Zip:** ORLANDO, FL 32859

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:** CLAY FRANKEL

MGR

04/29/2010

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