

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000036664

FILED
Apr 30, 2009
Secretary of State

Entity Name: AMBIENTCLEAR SOLUTIONS, LLC

Current Principal Place of Business:

14040 NW 82 AVE
MIAMI LAKES, FL 33016 US

New Principal Place of Business:

Current Mailing Address:

15440 SW 20 LN
MIAMI, FL 33185 US

New Mailing Address:

14040 NW 82 AVE
MIAMI LAKES, FL 33016 US

FEI Number: 20-4659236

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, ROMARICO M
14040 NW 82 AVE
MIAMI LAKES, FL 33016 US

Name and Address of New Registered Agent:

ALVAREZ, SANDRO M
14040 NW 82 AVE
MIAMI LAKES, FL 33016 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: SANDRO ALVAREZ

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MORAL, JORGE R
Address: 9141 NW 166 TERR
City-St-Zip: MIAMI, FL 33018 US

Title: MGR () Delete
Name: SANCHEZ, ROMARICO M
Address: 15440 SW 20 LN
City-St-Zip: MIAMI, FL 33185 US

Title: MGR () Delete
Name: ALVAREZ, SANDRO M
Address: 14040 NW 82 AVE
City-St-Zip: MIAMI LAKES, FL 33016 US

ADDITIONS/CHANGES:

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

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: ALVAREZ, SANDRO

MGR

04/30/2009

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