2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037979

Entity Name: BILLED RIGHT LLC.

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

253 LIVE OAK BLVD 1913 VARICK WAY

CASSELBERRY, FL 32707 CASSELBERRY, FL 32707

Current Mailing Address: New Mailing Address:

253 LIVE OAK BLVD 1913 VARICK WAY

CASSELBERRY, FL 32707 CASSELBERRY, FL 32707

FEI Number: 74-3173254 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PATEL, SAURIN
253 LIVE OAK BLVD
APT # 305

PATEL, SAURIN
2000 MANHATTAN LN
CASSELBERRY, FL 32707 US

APT#305 CASSELBERRY, FL 32707 US CASSELBERRY, FL 32707

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: SAURIN PATEL 01/14/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 PATEL, SAURIN
 Name:

 Address:
 2000 MANHATTAN LN
 Address:

 City-St-Zip:
 CASSELBERRY, FL 32707 US
 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 PATEL, GAURANG D
 Name:
 PATEL, DARSHAN D

 Address:
 5824 MARIPOSA COVE LN
 Address:
 508 LEGACY PARK DRIVE

 City-St-Zip:
 ORLANDO, FL 32707 US
 City-St-Zip:
 CASSELBERRY, FL 32707 US

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: SAURIN PATEL MMG 01/14/2009