2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000057224

Name:

Entity Name: MATTHEWSOLUTIONS, LLC

FILED Apr 28, 2008 Secretary of State

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

2117 S. BABCOCK ST., SUITE 201 2117 S. BABCOCK ST. MELBOURNE, FL 32901 SUITE 201

MELBOURNE, FL 32901

Current Mailing Address: New Mailing Address:

2117 S. BABCOCK ST., SUITE 201 2117 S. BABCOCK ST. MELBOURNE, FL 32901 SUITE 201

MELBOURNE, FL 32901

FEI Number: 20-0006398 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MATTHEWS, DESIREE S MATTHEWS, DESIREE S 2929 ELBIB DR. 2117 S. BABCOCK ST. ST. CLOUD, FL 34772 US SUITE 201 MELBOURNE, FL 32901 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: DESIREE S. MATTHEWS 04/28/2008

> Electronic Signature of Registered Agent Date

> > Name:

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Change () Addition () Delete MATTHEWS, MIKE B

Address: 2117 SOUTH BABCOCK ST SUITE 201 Address: City-St-Zip: MELBOURNE, FL 32901 City-St-Zip:

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

Name: MATTHEWS, DESIREE S Name: Address: 2117 SOUTH BABCOCK ST SUITE 201 Address: City-St-Zip: MELBOURNE, FL 32901 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: MIKE B. MATTHEWS 04/28/2008