2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000079916

1. Entity Name
L.E.T. CONSULTING L.L.C.

Principal Place of Business
9608 PORTSIDE TERRACE
BRADENTON, FL 34212

Mailing Address
9608 PORTSIDE TERRACE
BRADENTON, FL 34212

04292008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0635268
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

MURRAY, LUCIUS
9608 PORTSIDE TERRACE
BRADENTON, FL 34212

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8. 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. I am familiar with, and accept the obligations of, my position as registered agent.

SIGNATURE: Lucius Murray 4-29-08
(NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

U00000936804
05/27/08-80028-017 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MURRAY, LUCIUS
STREET ADDRESS	9608 PORTSIDE TERRACE
CITY-ST-ZIP	BRADENTON, FL 34212
TITLE	MGRM
NAME	MURRAY, ANTIONETTE
STREET ADDRESS	9608 PORTSIDE TERRACE
CITY-ST-ZIP	BRADENTON, FL 34212
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental requests is true and accurate and that my 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: Lucius Murray LUCIUS MURRAY 4-29-08 941-744-5108
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #