

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000096420

FILED
Jul 14, 2008
Secretary of State

Entity Name: CONSOLIDATED PURCHASING SOLUTIONS LLC

Current Principal Place of Business:

4190 NORTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32804

New Principal Place of Business:

601 NORTH NEW YORK AVENUE, SUITE 201
WINTER PARK, FL 32779

Current Mailing Address:

PO BOX 547902
ORLANDO, FL 32854

New Mailing Address:

FEI Number: 20-5637336 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HILLPOT, TRAVIS
2881 CITRON DRIVE
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

HILLPOT, TRAVIS
753 CRISTALDI WAY
LONGWOOD, FL 32779 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: TRAVIS W HILLPOT

07/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: HILLPOT, TRAVIS
Address: 2881 CITRON DRIVE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: HILLPOT, TRAVIS
Address: 753 CRISTALDI WAY
City-St-Zip: LONGWOOD, FL 32779

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: TRAVIS W HILLPOT

MGR

07/14/2008

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