

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000107091

FILED
Jan 24, 2007
Secretary of State

Entity Name: ELAYAWAY INVESTMENT, LLC

Current Principal Place of Business:

1625 SUMMIT LAKE DRIVE
HILLSIDE BUILDING, SUITE 205
TALLAHASSEE, FL 32317

New Principal Place of Business:

1625 SUMMIT LAKE DRIVE
HILLSIDE BUILDING, SUITE 205
TALLAHASSEE, FL 32317 US

Current Mailing Address:

1625 SUMMIT LAKE DRIVE
HILLSIDE BUILDING, SUITE 205
TALLAHASSEE, FL 32317

New Mailing Address:

1625 SUMMIT LAKE DRIVE
HILLSIDE BUILDING, SUITE 205
TALLAHASSEE, FL 32317 US

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

Name and Address of Current Registered Agent:

RYNCARZ, MATTHEW
1625 SUMMIT LAKE DRIVE
HILLSIDE BUILDING, SUITE 205
TALLAHASSEE, FL 32317 US

Name and Address of New Registered Agent:

RYNCARZ, MATTHEW A
1625 SUMMIT LAKE DRIVE
HILLSIDE BUILDING, SUITE 205
TALLAHASSEE, FL 32317 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: MATTHEW A RYNCARZ

01/24/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR () Change (X) Addition
Name: RYNCARZ, MATTHEW A PRESIDE
Address: 1625 SUMMIT LAKE DRIVE, SUITE 205
City-St-Zip: TALLAHASSEE, FL 32317 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MATTHEW A RYNCARZ

MGR

01/24/2007

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