

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000109807

FILED
Aug 23, 2008
Secretary of State

Entity Name: EXCEPTIONAL PROCESSING, LLC

Current Principal Place of Business:

331 CABANA VIEW LANE
SANFORD, FL 32771

New Principal Place of Business:

2261 RETREAT VIEW CIRCLE
SANFORD, FL 32771

Current Mailing Address:

331 CABANA VIEW LANE
SANFORD, FL 32771

New Mailing Address:

2261 RETREAT VIEW CIRCLE
SANFORD, FL 32771

FEI Number: 03-0416087 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:

SHAMECCA, ALLEN
331 CABANA VIEW LANE
SANFORD, FL FL US

Name and Address of New Registered Agent:

SHAMECCA, ALLEN
2261 RETREAT VIEW CIRCLE
SANFORD, FL FL 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:

08/23/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ALLEN, SHAMECCA
Address: 331 CABANA VIEW LANE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ALLEN, SHAMECCA
Address: 2261 RETREAT VIEW CIRCLE
City-St-Zip: SANFORD, FL 32771

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: SHAMECCA ALLEN

MGR

08/23/2008

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