2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 16, 2009
Secretary of State

DOCUMENT# L07000000992

Entity Name: SOLOMONFX, LLC

Current Principal Place of Business:

3440 HOLLYWOOD BLVD
SUITE 415
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

Current Mailing Address:

3440 HOLLYWOOD BLVD
SUITE 415
HOLLYWOOD, FL 33021 US

New Mailing Address:

FEI Number: 30-0396610 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

SHARPE, ROBERT
1000 PARK VIEW DR
APT 109
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: LEHN, CHRISTOPHER
Address: 3119 BRUSHWOOD DR.
City-St-Zip: CASTLE ROCK, CO 80109 US

Title: MGRM ( ) Delete
Name: SHARPE, ROBERT
Address: 1000 PARK VIEW DR APT 109
City-St-Zip: HALLANDALE, FL 33009 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: CHRISTOPHER LEHN PRES 07/16/2009

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