2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# L07000014821

Entity Name: STRATEGIC INVESTMENTS SOLUTION, LLC

Current Principal Place of Business:

4645 STATE ROAD 207
EKLTON, FL 32033

New Principal Place of Business:

4645 STATE ROAD 207
ELKTON, FL 32033

Current Mailing Address:

POST OFFICE BOX 216
ELKTON, FL 32033

New Mailing Address:

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

Name and Address of Current Registered Agent:

PINKNEY-BELL, HELEN
4625 STATE ROAD 207
EKLTON, FL 32033 US

Name and Address of New Registered Agent:

PINKNEY-BELL, HELEN
4645 STATE ROAD 207
ELKTON, FL 32033 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: _____ 04/07/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: PINKEY-BELL, HELEN
Address: PO BOX 216
City-St-Zip: ELKTON, FL 32033

Title: MGRM ( ) Delete
Name: BELL, JOHN V
Address: PO BOX 216
City-St-Zip: ELKTON, FL 32033

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: PINKNEY-BELL, HELEN
Address: PO BOX 216
City-St-Zip: ELKTON, FL 32033

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: HELEN PINKNEY-BELL MGRM 04/07/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date