

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000029417

FILED
Jun 16, 2009
Secretary of State

Entity Name: ALPHA & OMEGA HOME INSPECTORS, LLC

Current Principal Place of Business:

5775 FERNLEY DRIVE, TWO W #148
WEST PALM BEACH, FL 33415

New Principal Place of Business:

5775 FERNLEY DR. WEST
148
WEST PALM BEACH, FL 33415-834

Current Mailing Address:

5775 FERNLEY DRIVE, TWO W #148
WEST PALM BEACH, FL 33415

New Mailing Address:

5775 FERNLEY DR. WEST
148
WEST PALM BEACH, FL 33415-834

FEI Number: 26-0721587 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:

SAMAYOA, HAROLD R
5775 FERNLEY DRIVE, TWO W #148
WEST PALM BEACH, FL 33415 US

Name and Address of New Registered Agent:

SAMAYOA, HAROLD R
5775 FERNLEY DR. WEST
148
WEST PALM BEACH, FL 33415-834 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:

06/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SAMAYOA, HAROLD R
Address: 5775 FERNLEY DRIVE, TWO W #148
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SAMAYOA, HAROLD R
Address: 5775 FERNLEY DR. WEST # 148
City-St-Zip: WEST PALM BEACH, FL 33415-834

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: HAROLD R SAMAYOA

MGR

06/16/2009

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