2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 28, 2008 8:00 am Secretary of State 04-03-2008 90070 025 ***138.75 **DOCUMENT # L07000045892** 1. Entity Name **BOTTOM LINE LLC** Principal Place of Business Mailing Address 30005056 796 SILVER POND DRIVE **796 SILVER POND DRIVE** SOUTH DAYTONA, FL 32119 SOUTH DAYTONA, FL 32119 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. 01162008 Cha-LLC CR2E083 (12/06) City & State City & State Applied For O - 898 2574 Not Applicable Zip Country Zip \$5.00 Additional 5. Certificate of Status Desired Fee Required_ 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCGEE BROCKENBROUGH, SHARON Street Address (P.O. Box Number is Not Acceptable) 883 WEST GRANADA BLVD. ORMOND BEACH, FL 32174 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, speed or privided name of regretared agent and title if applicable. DATE Make check payable to: FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10, MGR fin F ☐ Delete TITLE YASHUS, KENNETH M NAME NAME STREET AODRESS 796 SILVER POND DRIVE STREET ADORESS CITY-ST-ZIP SOUTH DAYTONA, FL 32119 CITY, ST. 71P MGRM-Delete Change ☐ Addition YASHUS, BECKI M MME 796 SILVER POND DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SOUTH DAYTONA, FL 32119 CITY-ST-ZP TITLE Deleta TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP Delete TITLE TITLE Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP TITLE Delete MILE ☐ Change Addition NUME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P 11. Eheraby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under only; 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.

Kenneth M. Yashus

800-881-384

SIGNATURE!