2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000046562

Entity Name: 360 NUTRITIONAL SOLUTIONS LLC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7217 EAST COLONIAL DRIVE 7217 EAST COLONIAL DRIVE

SUITE 114 SUITE 113

ORLANDO, FL 32807 ORLANDO, FL 32807

Current Mailing Address: New Mailing Address:

7217 EAST COLONIAL DRIVE 7217 EAST COLONIAL DRIVE

 SUITE 114
 SUITE 113

 ORLANDO, FL 32807
 ORLANDO, FL 32807

FEI Number: 64-0959740 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THOMAS, KEITH
7217 EAST COLONIAL DRIVE
SUITE 114
THOMAS, KEITH
7217 EAST COLONIAL DRIVE
SUITE 113
THOMAS, KEITH
7217 EAST COLONIAL DRIVE
SUITE 113

ORLANDO, FL 32807 US SUITE 113 ORLANDO, FL 32807 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: KEITH M THOMAS 04/30/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: KEITH, THOMAS Name: KEITH, THOMAS
Address: 7217 EAST COLONIAL DRIVE SUITE 114 Address: 7217 EAST COLONIAL DRIVE SUITE 113

City-St-Zip: ORLANDO, FL 32807 City-St-Zip: ORLANDO, FL 32807

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: KEITH M THOMAS MR 04/30/2009