

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000050900

Entity Name: E CLICK SALES, L.L.C.

FILED  
May 01, 2008  
Secretary of State

## Current Principal Place of Business:

520 RIVER DRIVE  
VERO BEACH, FL 32963

## New Principal Place of Business:

505 BEACHLAND BLVD  
VERO BEACH, FL 32963

## Current Mailing Address:

520 RIVER DRIVE  
VERO BEACH, FL 32963

## New Mailing Address:

505 BEACHLAND BLVD  
VERO BEACH, FL 32963

FEI Number: 26-0188833      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:

COASTAL CORPORATE SERVICES, INC.  
1701 HIGHWAY A-1-A, SUITE 220  
VERO BEACH, FL 32963 US

## Name and Address of New Registered Agent:

COSTAL ESCROW SERVICES  
505 BEACHLAND BLVD  
SUITE 2  
VERO BEACH, FL 32963 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: MICHAEL OLVEY

05/01/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: OLVEY, MICHAEL W JR.  
Address: 520 RIVER DRIVE  
City-St-Zip: VERO BEACH, FL 32963

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: OLVEY, MICHAEL W JR.  
Address: 505 BEACHLAND BLVD  
City-St-Zip: VERO BEACH, FL 32963

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: MICHAEL OLVEY

MGR

05/01/2008

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