

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000057185

FILED
Jun 10, 2008
Secretary of State**Entity Name:** UTMOST LLC**Current Principal Place of Business:**1000 SOUTH SEMORAN BOULEVARD
303
WINTER PARK, FL 32792 US**New Principal Place of Business:****Current Mailing Address:**1000 SOUTH SEMORAN BOULEVARD
303
WINTER PARK, FL 32792 US**New Mailing Address:****FEI Number:** 45-0560154**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**BOLET, SHERIAR J OWNER
1000 SOUTH SEMORAN BOULEVARD
303
WINTER PARK, FL 32792 US**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent_____
Date**MANAGING MEMBERS/MANAGERS:****Title:** MGR () Delete
Name: BOLET, SHERIAR J OWNER
Address: 1000 SOUTH SEMORAN BOULEVARD, APT.#303
City-St-Zip: WINTER PARK, FL 32792 US**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MGR () Change (X) Addition
Name: BOLET, MICHAEL D PRESIDE
Address: 5101 MYSTIC POINT CT
City-St-Zip: ORLANDO, FL 32792

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: SHERIAR J BOLET

OWNE

06/10/2008

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