

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000066001

Entity Name: AXIOM INVESTMENTS, LLC

FILED
Apr 24, 2008
Secretary of State

Current Principal Place of Business:

4630 S. KIRKMAN RD. #224
ORLANDO, FL 32811

New Principal Place of Business:

3863 COVINGTON LANE
LAKELAND, FL 33810

Current Mailing Address:

4630 S. KIRKMAN RD. #224
ORLANDO, FL 32811

New Mailing Address:

3863 COVINGTON LANE
LAKELAND, FL 33810

FEI Number: 01-0903482

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, LYNWOOD L II
35 LAKE MORTON DR.
LAKE LAND, FL 33801

Name and Address of New Registered Agent:

BELL, LYNDIA L
3863 COVINGTON LANE
LAKELAND, FL 33810 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: LYNDIA L BELL

04/24/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BELL, LYNWOOD L II
Address: 4630 S. KIRKMAN RD. #224
City-St-Zip: ORLANDO, FL 32811

Title: MGRM () Delete
Name: BELL, LYNDIA L
Address: 4630 S. KIRKMAN RD., #224
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BELL, LYNWOOD L II
Address: 35 LAKE MORTON DR.
City-St-Zip: LAKE LAND, FL 33801

Title: MGRM (X) Change () Addition
Name: BELL, LYNDIA L
Address: 3863 COVINGTON LANE
City-St-Zip: LAKELAND, FL 33810

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: LYNWOOD L BELL II

MGRM

04/24/2008

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