

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000068887

FILED
Sep 25, 2009
Secretary of State**Entity Name:** AFT, LLC**Current Principal Place of Business:**7232 WEST SAND LAKE ROAD
SUITE 201
ORLANDO, FL 32819**New Principal Place of Business:****Current Mailing Address:**7232 WEST SAND LAKE ROAD
SUITE 201
ORLANDO, FL 32819**New Mailing Address:****FEI Number:** 26-0502592**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ARORA, VINOD
7232 WEST SAND LAKE ROAD
SUITE 201
ORLANDO, FL 32819 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: AMIN FAMILY TRUST
Address: 7232 WEST SAND LAKE ROAD SUITE 201
City-St-Zip: ORLANDO, FL 32819**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:****Title:** MGRM (X) Change () Addition
Name: AMIN FAMILY TRUST
Address: 7232 WEST SAND LAKE ROAD SUITE 201
City-St-Zip: ORLANDO, FL 32819**Title:** MGRM () Change (X) Addition
Name: AMIN, SAMIR V
Address: 3960 AVALON PARK BLVD
City-St-Zip: ORLANDO, FL 32828

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: S AMIN

MGRM

09/25/2009

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