

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000080651

FILED
Jan 14, 2009
Secretary of State

Entity Name: FLECKZ SOLUTIONS LLC

Current Principal Place of Business:

2738 W, THARPE ST.
1406
TALLAHASSEE, FL 32303 US

Current Mailing Address:

2738 W, THARPE ST.
1406
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

3012 TULE AVE
3213
FORT WORTH, TX 76116 US

New Mailing Address:

P.O. BOX 121414
FORT WORTH, TX 76121 US

FEI Number: 26-0831341

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCRAGG, MATTHEW A
2738 W, THARPE ST.
1406
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

SCRAGG, MATTHEW A
2738 W, THARPE ST.
503
TALLAHASSEE, FL 32303 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: MATTHEW ALAN SCRAGG

01/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SCRAGG, MATTHEW A
Address: 2738 W, THARPE ST. 1406
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SCRAGG, MATTHEW A
Address: PO BOX 121414
City-St-Zip: FORT WORTH, TX 76121

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: MATTHEW ALAN SCRAGG

MGR

01/14/2009

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