

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000089061

FILED  
Jan 30, 2009  
Secretary of State

**Entity Name:** SHAMROCK BUSINESS SOLUTIONS LLC

**Current Principal Place of Business:**

305 S SALISBURY TERRACE  
LECANTO, FL 34461

**New Principal Place of Business:**

**Current Mailing Address:**

BOX 136  
2609 N FOREST RIDGE BLVD  
HERNANDO, FL 34442

**New Mailing Address:**

305 S SALISBURY TERRACE  
LECANTO, FL 34461

**FEI Number:** 20-5217555

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHIRAYATH, RAYMOND  
1382 W CROSSVIEW WAY  
HERNANDO, FL 34442 US

**Name and Address of New Registered Agent:**

CHIRAYATH, RAYMOND  
1724 E RIDGELINE PATH  
INVERNESS, FL 34453 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: RAYMOND CHIRAYATH

01/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CHIRAYATH, RAYMOND  
Address: 1382 W CROSSVIEW WAY  
City-St-Zip: HERNANDO, FL 34442

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CHIRAYATH, RAYMOND  
Address: 1724 E RIDGELINE PATH  
City-St-Zip: INVERNESS, FL 34453

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: RAYMOND CHIRAYATH

MGRM

01/30/2009

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