2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000110165

Entity Name: DESTINY INVESTMENT GROUP, LLC

FILED Jul 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1400 VILLAGE SQUARE BLVD. #3 16476 MAHAN DRIVE

PMB 406 TALLAHASSEE, FL 32309 US

TALLAHASSEE, FL 32312 US

Current Mailing Address: New Mailing Address:

1400 VILLAGE SQUARE BLVD. #3 16476 MAHAN DRIVE

PMB 406 TALLAHASSEE, FL 32309 US TALLAHASSEE, FL 32312 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

CORPORATION SERVICE COMPANY WORKMAN, ROXANNE K MGR
1201 HAYS STREET 16476 MARKED BIVE

TALLAHASSEE, FL 32301 US TALLAHASSEE, FL 32309 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: ROXANNE K WORKMAN 07/28/2008

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 WORKMAN, ROXANNE K
 Name:
 WORKMAN, ROXANNE K

 Address:
 2890 GREEN FOREST LANE
 Address:
 16476 MAHAN DRIVE

 City-St-Zip:
 TALLAHASSEE, FL 32312 US
 City-St-Zip:
 TALLAHASSEE, FL 32309 US

(X) Change () Addition Title: MGRM () Delete Title: MGRM Name: WORKMAN, MCKINNLEY R Name: WORKMAN, MCKINNLEY R Address: 2890 GREEN FOREST LANE Address: 16476 MAHAN DRIVE City-St-Zip: TALLAHASSEE, FL 32312 US City-St-Zip: TALLAHASSEE, FL 32309 US

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: ROXANNE K WORKMAN MGR 07/28/2008