2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 01, 2009
Secretary of State

DOCUMENT# L07000118311

Entity Name: BLUE SKY PEST SOLUTIONS, L.L.C.

Current Principal Place of Business:

9150 GALLERIA COURT
100
NAPLES, FL 34108

New Principal Place of Business:

17528 ALLENTOWN RD
FORT MYERS, FL 33912

Current Mailing Address:

P.O. BOX 111943
NAPLES, FL 34108

New Mailing Address:

FEI Number: 26-1095814 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:

YOUNG, MATTHEW S
17528 ALLENTOWN ROAD
FORT MYERS, FL 33912 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: MGRM ( ) Delete
Name: YOUNG, MATTHEW S
Address: 17528 ALLENTOWN ROAD
City-St-Zip: FORT MYERS, FL 33912

Title: MGR ( ) Delete
Name: PAQUETTE, ROBERT G
Address: 3111 TERAMAR COURT
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 YOUNG MMBR 09/01/2009

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