2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000124623

Entity Name: GET' IT DONE SERVICES, LLC

FILED Mar 23, 2009 Secretary of State

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

235 WEST WILD BRIAR ROAD 1810 LIGHTHOUSE RD.

SANTA ROSA BEACH, FL 32459 US CARRABELLE BEACH, FL 32322 US

Current Mailing Address: New Mailing Address:

PO BOX 1344 1810 LIGHTHOUSE RD.

SANTA ROSA BEACH, FL 32459 US CARRABELLE BEACH, FL 32322 US

FEI Number: 26-2084971 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LOVELL, JEFFERSON
235 WEST WILD BRIAR ROAD
LOVELL, JEFFERSON
1810 LIGHTHOUSE RD.

SANTA ROSA BEACH, FL 32459 US CARRABELLE BEACH, FL 32322 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: JEFFERSON M. LOVELL 03/23/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGMB (X) Change () Addition
Name: LOVELL, JEFF
Name: LOVELL, JEFF

Address: 235 WEST WILD BRIAR ROAD Address: 1810 LIGHTHOUSE RD.

City-St-Zip: SANTA ROSA BEACH, FL 32459 US City-St-Zip: CARRABELLE BEACH, FL 32322 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: JEFFFERSON M. LOVELL M.M. 03/23/2009