

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000036886

Entity Name: C3A SOLUTIONS, LLC

FILED
Jan 28, 2009
Secretary of State

Current Principal Place of Business:

18455 MIRAMAR PARKWAY
#128
MIRAMAR, FL 33029 US

New Principal Place of Business:

19200 NW 22ND ST.
PEMBROKE PINES, FL 33029 US

Current Mailing Address:

18455 MIRAMAR PARKWAY
#128
MIRAMAR, FL 33029 US

New Mailing Address:

19200 NW 22ND ST.
PEMBROKE PINES, FL 33029 US

FEI Number: 26-2421939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOBGOOD, CHARLES DAVID
18650 SW 39TH COURT
MIRAMAR, FL 33029 US

Name and Address of New Registered Agent:

GATES, GLEN C
19200 NW 22ND ST
PEMBROKE PINES, FL 33029 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: GLEN C. GATES

01/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HOBGOOD, CHARLES DAVID
Address: 18650 SW 39TH COURT
City-St-Zip: MIRAMAR, FL 33029 US

Title: MGRM (X) Delete
Name: GATES, GLEN CHARLES
Address: 19200 NW 22ND STREET
City-St-Zip: PEMBROKE PINES, FL 33029 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GATES, GLEN C
Address: 19200 NW 22ND ST.
City-St-Zip: PEMBROKE PINES, FL 33029 US

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: GLEN C. GATES

MGRM

01/28/2009

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