

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000041567

Entity Name: SKADOIT LLC

FILED
Apr 29, 2011
Secretary of State

Current Principal Place of Business:

1835 EAST WEST PARKWAY, STE 9
FLEMING ISLAND, FL 32003

New Principal Place of Business:

Current Mailing Address:

1835 EAST WEST PARKWAY, STE 9
FLEMING ISLAND, FL 32003

New Mailing Address:

FEI Number: 22-3978722

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

COOPER RIDGE & SAFI
136 EAST BAY STREET
SUITE 301
JACKSONVILLE, FL 32202 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: STEPHEN NYE

04/29/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: CEO
Name: NYE, STEPHEN
Address: 1835 EAST WEST PARKWAY, STE 9
City-St-Zip: FLEMING ISLAND, FL 32003

Title: D
Name: WIDDOWS, JOHN
Address: 1835 EAST WEST PARKWAY, STE 9
City-St-Zip: FLEMING ISLAND, FL 32003

Title: D
Name: NYE, DENNIS
Address: 1835 EAST WEST PARKWAY, STE 9
City-St-Zip: FLEMING ISLAND, FL 32003

Title: D
Name: ELLIOTT, BRAD
Address: 1835 EAST WEST PARKWAY, STE 9
City-St-Zip: FLEMING ISLAND, FL 32003

Title: D
Name: JIM, PAULIN
Address: 1835 EAST WEST PARKWAY, STE 9
City-St-Zip: FLEMING ISLAND, FL 32003

Title: D
Name: HOURMOUZIS, NICK
Address: 1835 EAST WEST PARKWAY, STE 9
City-St-Zip: FLEMING ISLAND, FL 32003

I hereby 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: STEPHEN NYE

CEO

04/29/2011

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