

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000083245

Entity Name: MELKEN SOLUTIONS, LLC

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

689 LAGOON DR
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

689 LAGOON DR
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 26-3279860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHEELER, MELANIE J
689 LAGOON DR
OVIEDO, FL 32765 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: PRES () Delete
Name: WHEELER, MELANIE J
Address: 689 LAGOON DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: GMGR () Delete
Name: FELDER, KENDALL D
Address: 689 LAGOON DR
City-St-Zip: OVIEDO, FL 32765

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: KENDALL D FELDER

GMGR

01/15/2009

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