

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000088674

Entity Name: PIVOTAL SOLUTIONS LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

23647 SHINING STAR DR.
LAND O LAKES, FL 34639

New Principal Place of Business:

Current Mailing Address:

23647 SHINING STAR DR.
LAND O LAKES, FL 34639

New Mailing Address:

FEI Number: 26-3468269 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GELLER, DAVID
23647 SHINING STAR DR.
LAND O LAKES, FL 34639 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: GELLER, DAVID
Address: 23647 SHINING STAR DR.
City-St-Zip: LAND O LAKES, FL 34639

Title: MGRM () Delete
Name: CROSLAND, KIMBERLY
Address: 5828 TERNCREST DR.
City-St-Zip: LITHIA, FL 33547

Title: MGRM () Delete
Name: PICKLE, RANDI
Address: 2331 SANDRALA DR.
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES:

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

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: DAVID GELLER

MGRM

04/29/2009

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