

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000000207

**FILED**  
**Feb 12, 2010**  
**Secretary of State**

**Entity Name:** CLICKIT, LLC

**Current Principal Place of Business:**

3329 MEDICI BLVD.  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

**Current Mailing Address:**

3329 MEDICI BLVD.  
NEW SMYRNA BEACH, FL 32168

**New Mailing Address:**

**FEI Number:** 80-0326112

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARMEDA, SHAILEN S  
3329 MEDICI BLVD.  
NEW SMYRNA BEACH, FL 32168 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  
**Name:** BARMEDA, SHAILEN S  
**Address:** 3329 MEDICI BLVD  
**City-St-Zip:** NEW SMYRNA BEACH, FL 32168

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: SHAILEN BARMEDA

MGRM

02/12/2010

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