2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2012
Secretary of State

DOCUMENT# L09000066094

Entity Name: MITIGATION SERVICE SOLUTIONS LLC

Current Principal Place of Business:

8194 STURBRIDGE CT.
WEEKI WACHEE, FL 34613

New Principal Place of Business:

7350 W HADENOTTER LN
HOMASASSA, FL 34446

Current Mailing Address:

8194 STURBRIDGE CT.
WEEKI WACHEE, FL 34613

New Mailing Address:

7350 W HADENOTTER LN
HOMASASSA, FL 34446

FEI Number: 27-0510793 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOMAN, THOMAS L
8194 STURBRIDGE CT
WEEKI WACHEE, FL 34613 US

Name and Address of New Registered Agent:

HOMAN, THOMAS L
1173 ACADEMY AVE
SPRING HILL, FL 34606 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: _____ 04/24/2012
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: CEO
Name: HOMAN, THOMAS L
Address: 1173 ACADEMY AVE
City-St-Zip: SPRING HILL, FL 34606

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 Statues.

SIGNATURE: THOMAS HOMAN CEO 04/24/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date