2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000076678

Entity Name: MAGNOLIA CUSTOMER CARE CENTER, LLC

FILED May 01, 2012 Secretary of State

New Principal Place of Business: Current Principal Place of Business:

820 LIGHTHOUSE DRIVE 1102 B2 GREEN PINE BLVD

WEST PALM BEACH, FL 33409 US

NORTH PALM BEACH, FL 33408 US

Current Mailing Address: New Mailing Address:

820 LIGHTHOUSE DRIVE 1102 B2 GREEN PINE BLVD

WEST PALM BEACH, FL 33409 US NORTH PALM BEACH, FL 33408 US

FEI Number: 27-0710145 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JEAN-LOUIS, SHIRLEY JEAN-LOUIS, SHIRLEY 1102 B2 GRÉEN PINE BLVD 820 LIGHTHÓUSE DRIVE US

WEST PALM BEACH, FL 33409 NORTH PALM BEACH, FL 33408 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: 05/01/2012

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGRM

JEAN-LOUIS, SHIRLEY Name: Address: 1102 B2 GREEN PINE BLVD City-St-Zip: WEST PALM BEACH, FL 33409 US

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.

05/01/2012 SIGNATURE: SHIRLEY JEAN-LOUIS **MGRM**