

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000053266

Entity Name: SCX LICENSING LLC

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4568 WILDEWOOD DRIVE  
DELRAY BEACH, FL 33445 US

**New Principal Place of Business:**

**Current Mailing Address:**

4568 WILDEWOOD DRIVE  
DELRAY BEACH, FL 33445 US

**New Mailing Address:**

FEI Number: 27-4695664

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REINISCH, HANS DR  
4568 WILDWOOD DRIVE  
DELRAY BEACH, FL 33445 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: REINISCH, HANS DR  
Address: 4568 WILDEWOOD DRIVE  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: MGRM  
Name: OTTO, JAN  
Address: 2940 SINKS CANYON ROAD  
City-St-Zip: LANDER, WY 82520 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 Statutes.

SIGNATURE: DR.HANS REINISCH

MGRM

04/29/2011

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