

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000035959

Entity Name: ELA SOLUTIONS, LLC

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

808 ELMONT STREET NW  
PALM BAY, FL 32907

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 121356  
WEST MELBOURNE, FL 32912

**New Mailing Address:**

FEI Number: 45-1038644

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AUSTIN, LESLI  
808 ELMONT STREET NW  
PALM BAY, FL 32907 US

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

AUSTIN, L  
808 ELMONT STREET NW  
PALM BAY, FL 32907 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: L AUSTIN

05/01/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: AUSTIN, L  
Address: PO BOX 121356  
City-St-Zip: WEST MELBOURNE, FL 32912

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: L AUSTIN

MGRM

05/01/2012

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