

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001518

Entity Name: ALLIED SOLUTIONS, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

1320 CITY CENTER DRIVE, SUITE 300
CARMEL, IN 46032

New Principal Place of Business:

Current Mailing Address:

1320 CITY CENTER DRIVE, SUITE 300
CARMEL, IN 46032

New Mailing Address:

FEI Number: 35-2125376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGR () Delete
Name: HILGER, CHRISTOPHER M
Address: 1320 CITY CENTER DRIVE, SUITE 300
City-St-Zip: CARMEL, IN 46032

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: HILGER, PETER
Address: 1320 CITY CENTER DRIVE, SUITE 300
City-St-Zip: CARMEL, IN 46032

Title: MGR () Change (X) Addition
Name: LIUM, ROBERT J
Address: 1320 CITY CENTER DRIVE, SUITE 300
City-St-Zip: CARMEL, IN 46032

Title: MGR () Change (X) Addition
Name: RADEL, DWAYNE
Address: 1320 CITY CENTER DRIVE, SUITE 300
City-St-Zip: CARMEL, IN 46032

Title: MGR () Change (X) Addition
Name: ZACCARO, WARREN J
Address: 1320 CITY CENTER DRIVE, SUITE 300
City-St-Zip: CARMEL, IN 46032

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ANNE MEYER

POA

04/29/2009

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