

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M02000002431

FILED
Aug 01, 2008
Secretary of State

Entity Name: CGI SALES, LLC

Current Principal Place of Business:

8008 E. ARAPAHOE COURT, STE. 200
CENTENNIAL, CO 80112

New Principal Place of Business:

10559 E. DEMOCRAT ROAD
PARKER, CO 80134

Current Mailing Address:

8008 E. ARAPAHOE COURT, STE. 200
CENTENNIAL, CO 80112

New Mailing Address:

10559 E. DEMOCRAT ROAD
PARKER, CO 80134

FEI Number: 48-1279050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301 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: CLARK, THOMAS
Address: 8008 E. ARAPAHOE COURT, STE. 200
City-St-Zip: CENTENNIAL, CO 80112

Title: MGR () Delete
Name: CLARK, MICHELLA G
Address: 8008 E. ARAPAHOE COURT, STE. 200
City-St-Zip: CENTENNIAL, CO 80112

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CLARK, THOMAS
Address: 10559 E. DEMOCRAT ROAD
City-St-Zip: PARKER, CO 80134

Title: MGR (X) Change () Addition
Name: CLARK, MICHELLA G
Address: 10559 E. DEMOCRAT ROAD
City-St-Zip: PARKER, CO 80134

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: MICHELLA G. CLARK

MGR

08/01/2008

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