2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000002177

Entity Name: CONSERVICE, LLC

COLE, GREG

173 W 100 N

PROVIDENCE, UT 84332

Name:

Address:

City-St-Zip:

FILED Aug 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1755 NORTH 400 EAST, SUITE 101 595 RIVERWOODS PARKWAY NORTH LOGAN, UT 84341 SUITE 300 LOGAN, UT 84321 **Current Mailing Address: New Mailing Address:** PO BOX 4696 LOGAN, UT 843234696 FEI Number: 87-0660875 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: REGISTERED AGENTS LEGAL SERVICES, INC. 155 OFFICE PLAZA DR. SUITE A TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete TREITLER, MARC Name: Name: Address: 10857 VAIENTE COURT Address: City-St-Zip: SAN DIEGO, CA 92124 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: JENKINS, DAVE Name: Address: 344 E. 2475 N. Address: City-St-Zip: NORTH LOGAN, UT 84341 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DORSEY, JOHN Name: Name: 1650 W. KITTY HAWK Address: Address: City-St-Zip: TUSCON, AZ 85737 City-St-Zip: () Delete Title: MGRM Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: GREG COLE MGRM 08/29/2008