

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000001859

Entity Name: C K SOLUTIONS LLC

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

21460 SNOWFLOWER DR.  
ROCKY RIVER, OH 44116

**New Principal Place of Business:**

**Current Mailing Address:**

21460 SNOWFLOWER DR.  
ROCKY RIVER, OH 44116

**New Mailing Address:**

FEI Number: 34-1492535

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MONTEZ, CHRISTINE  
11462 COMMERCIAL ST.  
ORLANDO, FL 32836 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  
Name: MIKULA, KAREN J  
Address: 21460 SNOWFLOWER DR.  
City-St-Zip: ROCKY RIVER, OH 44116

Title: MGR  
Name: MIKULA, JAMES F  
Address: 21460 SNOWFLOWER DR.  
City-St-Zip: ROCKY RIVER, OH 44116

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: KAREN J MIKULA

MGR

01/13/2010

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