

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004636

FILED
May 30, 2008
Secretary of State

Entity Name: BORDERS SOLUTIONS GROUP, L.L.C.

Current Principal Place of Business:

13814 WATER FOWL WAY
UPPER MARLBORO, MD 20774

New Principal Place of Business:

1400 MERCANTILE LANE SUITE 250
LARGO, MD 20774

Current Mailing Address:

13814 WATER FOWL WAY
UPPER MARLBORO, MD 20774

New Mailing Address:

1400 MERCANTILE LANE SUITE 250
LARGO, MD 20774

FEI Number: 51-0487479 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:

BUSINESS FILINGS INC.
1203 GOVERNORS SQUARE BLVD., SUITE 101
TALLAHASSEE, FL 323012960 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: MGRM () Delete
Name: BORDERS, VALENCIA
Address: 13814 WATER FOWL WAY
City-St-Zip: UPPER MARLBORO, MD 20774

Title: MGRM () Delete
Name: BORDERS, GREGORY
Address: 13814 WATER FOWL WAY
City-St-Zip: UPPER MARLBORO, MD 20774

ADDITIONS/CHANGES:

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

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

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: VERNITA LANE

DO

05/30/2008

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