2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# M07000000743

Entity Name: LOW OPERATIONAL SECURITY, LLC

Current Principal Place of Business:

450 HILLSIDE DRIVE, BLDG B, STE 200
MESQUITE, FL 89027

New Principal Place of Business:

4810 SW 143RD LOOP
OCALA, FL 34473

Current Mailing Address:

4810 SW 143RD LOOP
OCALA, FL 34473

New Mailing Address:

FEI Number: 20-5517617 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NAVARRO, ANTONIA
4810 SW 143 LOOP
OCALA, FL 34473 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: NAVARRO, ANTONIA
Address: 4810 SW 143 LOOP
City-St-Zip: OCALA, FL 34473

ADDITIONS/CHANGES:

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: ANTONIA NAVARRO PRES 04/28/2009

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