2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M0800000010

Entity Name: TELEVATE, LLC

FILED May 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8300 BREENSBORO DR. SUITE 800 MCLEAN, VA 22102

Current Mailing Address: New Mailing Address:

8300 BREENSBORO DR. SUITE 800 MCLEAN, VA 22102

FEI Number: 31-1808846 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORPDIRECT AGENTS INC. 515 EAST PARK AVE. 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:

City-St-Zip:

MCLEAN, VA 22102

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 BURKE, A. RICHARD
 Name:

 Address:
 8300 BREENSBORO DR. SUITE 800
 Address:

 City-St-Zip:
 MCLEAN, VA 22102
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Title:
 MGRM () Delete
 Title:
 () 0

 Name:
 ROSS, JOSEPH
 Name:

 Address:
 8300 BREENSBORO DR. SUITE 800
 Address:

 City-St-Zip:
 MCLEAN, VA 22102
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

Name: AGHILL, FRANK Name:
Address: 8300 BREENSBORO DR. SUITE 800 Address:

City-St-Zip: MCLEAN, VA 22102 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

Name: JONANNELLE, GUY Name:
Address: 8300 BREENSBORO DR. SUITE 800 Address:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 TADESSE, SOLEMON
 Name:
 TADESSE, SOLOMON

 Address:
 6862 ELM STREET STE 210
 Address:
 6862 ELM STREET STE 210

 City-St-Zip:
 MCLEAN, VA 22101
 City-St-Zip:
 MCLEAN, VA 22101

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.

City-St-Zip:

SIGNATURE: A. RICHARD BURKE MR. 05/16/2008