



LIMITED LIABILITY COMPANY ANNUAL REPORT

SOSID: 0870332
Date Filed: 5/18/2007 8:39:00 AM
Elaine F. Marshall
North Carolina Secretary of State
C200713800623

NAME OF LIMITED LIABILITY COMPANY: *Ameriserv LLC*

STATE OF INCORPORATION: *NC*

SECRETARY OF STATE R.L.L.P. ID NUMBER: *0870332*

NATURE OF BUSINESS: *BOOKKEEPING*

REGISTERED AGENT: *Olivera, Wilson a*

REGISTERED OFFICE MAILING ADDRESS: *8509 Fayetteville Road
Raleigh, NC 27603*

REGISTERED OFFICE STREET ADDRESS: *8509 Fayetteville Road
Raleigh, NC 27603 Wake County*

SIGNATURE OF THE NEW REGISTERED AGENT:

SIGNATURE CONSTITUTES CONSENT TO THE APPOINTMENT

PRINCIPAL OFFICE TELEPHONE NUMBER: *(919) 661-8633*

PRINCIPAL OFFICE MAILING ADDRESS: *8509 Fayetteville Road
Raleigh, NC 27603*

PRINCIPAL OFFICE STREET ADDRESS: *8509 Fayetteville Road
Raleigh, NC 27603*

MANAGERS/MEMBERS/ORGANIZERS:

Name: *WILSON A. OLIVERA* Name:
Title: *MANAGER* Title:
Address: *8509 FAYETTEVILLE RD* Address:
City: *RALEIGH* City:
State: *NC* Zip: *27603* State: Zip:

Name:
Title:
Address:
City:
State: Zip:

CERTIFICATION OF ANNUAL REPORT MUST BE COMPLETED BY ALL LIMITED LIABILITY COMPANIES

FORM MUST BE SIGNED BY A MANAGER/MEMBER

WILSON A. OLIVERA

TYPE OR PRINT NAME

DATE

05/15/2007
OWNER (MANAGER)

TYPE OR PRINT TITLE

ANNUAL REPORT FEE: \$200 MAIL TO: Secretary of State • Corporations Division • Post Office Box 29525 • Raleigh, NC 27626-0525

