

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000015617

Entity Name: ARASEL HOLDINGS, LLC

FILED  
Apr 07, 2009  
Secretary of State

**Current Principal Place of Business:**

150 SE 2ND AVE STE 901  
MIAMI, FL 33131

**New Principal Place of Business:**

150 SE 2ND AVE  
SUITE 901  
MIAMI, FL 33131 US

**Current Mailing Address:**

150 SE 2ND AVE STE 901  
MIAMI, FL 33131

**New Mailing Address:**

150 SE 2ND AVE  
SUITE 901  
MIAMI, FL 33131 US

FEI Number: 65-1071050

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LIMITED AGENT SERVICES, LLC  
150 SE 2ND AVE STE 901  
MIAMI, FL 33131 US

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

LIMITED AGENT SERVICES, LLC  
150 SE 2ND AVE  
SUITE 901  
MIAMI, FL 33131 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: STEFANIE BLACK LEWIS

04/07/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GOODFRIEND, STUART  
Address: 11900 BISCAYNE BLVD, SUITE 280  
City-St-Zip: MIAMI, FL 33181

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GOODFRIEND, STUART  
Address: 150 SE 2ND AVE SUITE 901  
City-St-Zip: MIAMI, FL 33131

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: STUART GOODFRIEND

MGRM

04/07/2009

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