

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90038 003 ****50.00

DOCUMENT # L01000005379

1. Entity Name
OLD CUTLER, LLC



Principal Place of Business
**9655 SOUTH DIXIE HIGHWAY
SUITE 200
MIAMI, FL 33156**

Mailing Address
**9655 SOUTH DIXIE HIGHWAY
SUITE 200
MIAMI, FL 33156**



04132006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1090493

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**LARKIN, JEREMY S
9655 SOUTH DIXIE HIGHWAY
SUITE #200
MIAMI, FL 33156**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	LARKIN, JEREMY S
STREET ADDRESS	9655 S DIXIE HIGHWAY #200
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	MGR
NAME	SCHMIDT, EDWARD L
STREET ADDRESS	9655 SOUTH DIXIE HIGHWAY #200
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	MGR
NAME	RODSTEIN, H JOSH
STREET ADDRESS	9655 SOUTH DIXIE HIGHWAY SUITE 200
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/19/06

305.938.4000