

**2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Jul 30, 2008  
Secretary of State**

DOCUMENT# L01000020914

Entity Name: FLEXXSPACE MANAGEMENT, LLC

**Current Principal Place of Business:**

1400 N.W. 107TH AVENUE  
MIAMI, FL 33172 US

**New Principal Place of Business:**

**Current Mailing Address:**

1400 N.W. 107TH AVENUE  
MIAMI, FL 33172 US

**New Mailing Address:**

FEI Number: 65-1157184      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LEVY, JOEL  
1400 N.W. 107TH AVENUE  
MIAMI, FL 33172 US

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

ADLER, LINDA K  
1400 N.W. 107TH AVENUE  
MIAMI, FL 33172 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: LINDA K. ADLER      07/30/2008  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ADLER NEWCO GP 2, IN, C.  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

Title: P ( ) Delete  
Name: ADLER, MICHAEL M  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172 US

Title: EVT ( ) Delete  
Name: LEVY, JOEL  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172 US

Title: EV ( ) Delete  
Name: HEISLER, DANIEL  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172 US

Title: EV ( ) Delete  
Name: HARRIS, BRETT W  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172 US

Title: S ( ) Delete  
Name: ADLER, LINDA K  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: EVT (X) Change ( ) Addition  
Name: ADLER, MATTHEW L  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: LINDA K. ADLER      S      07/30/2008  
\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date