

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030494

FILED
Apr 27, 2009
Secretary of State

Entity Name: LAS OLAS TRADING, LLC

Current Principal Place of Business:

401 E. LAS OLAS BLVD.
#1400
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

401 E. LOS OLAS BLVD.
#1400
FORT LAUDERDALE, FL 33301

New Mailing Address:

P.O. BOX 3511
JUPITER, FL 33469

FEI Number: 31-2480889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASE, JAMES A
401 E. LAS OLAS BLVD.
#1400
FT. LAUDERDALE, FL 33483 US

Name and Address of New Registered Agent:

CASE, JAMES A
4966 COUNTY LINE RD
JUPITER, FL 33469 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: _____

04/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CASE, JAMES
Address: 401 E. LAS OLAS BOULEVARD, SUITE 1400
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: MGR () Delete
Name: JAMES, CASE
Address: 401 E. LOS OLAS BLVD., #1400
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CASE, JAMES A
Address: P.O. BOX 3511
City-St-Zip: JUPITER, FL 33469

Title: MGR (X) Change () Addition
Name: JAMES, CASE
Address: P.O. BOX 3511
City-St-Zip: JUPITER, FL 33469

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: JAMES A. CASE

MGR

04/27/2009

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