

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
May 05, 2009  
Secretary of State**

DOCUMENT# L04000054857

Entity Name: 3500 HOLDINGS, LLC

**Current Principal Place of Business:**

C/O BRUCE A. WEIL  
100 SE 2ND ST, 28TH FLOOR  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

C/O BRUCE A. WEIL  
100 SE 2ND ST, 28TH FLOOR  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 20-1529052      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

KTG&S REGISTERED AGENT CORPORATION  
100 SE 2ND ST, STE 2800  
MIAMI, FL 331311714 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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR ( ) Delete  
Name: WEIL, BRUCE A  
Address: 100 SE 2ND ST, 28TH FLOOR  
City-St-Zip: MIAMI, FL 33131

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

Title: MGR ( ) Delete  
Name: CHO, TONY  
Address: 100 SE 2ND ST, 28TH FLOOR  
City-St-Zip: MIAMI, FL 33131

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: BRUCE WEIL

MGR

05/05/2009

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