2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000026441

Entity Name: RECOM PLANTATION, LLC

FILED Jan 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2 ALHAMBRA PLAZA, SUITE 860 2320 PONCE DE LEON BOULEVARD CORAL GABLES, FL 33134

SECOND FLOOR

CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

2 ALHAMBRA PLAZA, SUITE 860 2320 PONCE DE LEON BOULEVARD

CORAL GABLES, FL 33134 SECOND FLOOR

CORAL GABLES, FL 33134

FEI Number: 20-2560763 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DIAZ, RENE ESQ DIAZ, RENE ESQ

2320 PONCE DE LEON BOULEVARD, SECOND FLOOR 2 ALHAMBRA PLAZA, SUITE 860

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 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: RENE DIAZ 01/08/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete (X) Change () Addition

DIAZ. RENE DIAZ. RENE Name: Name:

2 ALHAMBRA PLAZA, SUITE 860 Address: 2320 PONCE DE LEON BOULEVARD, SECOND FLOOR Address: CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

City-St-Zip: City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition PADRON, CARLOS E Name: PADRON, CARLOS E Name:

Address: 2 ALHAMBRA PLAZA, SUITE 860 Address: 2320 PONCE DE LEON BOULEVARD, SECOND FLOOR

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete Title: MGR (X) Change () Addition VILA, OSCAR J III Name: VILA, OSCAR J III Name:

2 ALHAMBRA PLAZA, SUITE 860 2320 PONCE DE LEON BOULEVARD, SECOND FLOOR Address: Address:

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

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: OSCAR J. VILA 01/08/2009