

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109785

FILED  
Apr 20, 2012  
Secretary of State

Entity Name: BLOWN UP, LLC

**Current Principal Place of Business:**

1680 MICHIGAN AVENUE, SUITE 1001  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

1680 MICHIGAN AVENUE, SUITE 1001  
MIAMI BEACH, FL 33139

**New Mailing Address:**

FEI Number: 02-0759187

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GADINSKY, SETH  
1680 MICHIGAN AVENUE, SUITE 1001  
MIAMI BEACH, FL 33139 US

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

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:**

Title: MGRM  
Name: HALPERN, MARC  
Address: 1680 MICHIGAN AVENUE, SUITE 1001  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM  
Name: BALAN, MICHAEL  
Address: 1680 MICHIGAN AVENUE, SUITE 1001  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM  
Name: GADINSKY, SETH  
Address: 1680 MICHIGAN AVENUE, SUITE 1001  
City-St-Zip: MIAMI BEACH, FL 33139

I hereby 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: MARC HALPERN

MGRM

04/20/2012

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