

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000026668

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** MYLE MIAMI LLC

**Current Principal Place of Business:**

710 LENOX AVENUE  
SUITE 20  
MIAMI BEACH, FL 33139 US

**New Principal Place of Business:**

435 21ST STREET  
OFFICE 3  
MIAMI BEACH, FL 33139 US

**Current Mailing Address:**

PO BOX 190560  
MIAMI BEACH, FL 33119 US

**New Mailing Address:**

435 21ST STREET  
OFFICE 3  
MIAMI BEACH, FL 33139 US

**FEI Number:** 26-4626805      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

PICINELLI, GIORGIO  
710 LENOX AVENUE  
SUITE 20  
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:** PICINELLI, GIORGIO  
**Address:** 435 21ST STREET OFFICE 3  
**City-St-Zip:** MIAMI BEACH, FL 33139 US

**Title:** MGR  
**Name:** DE PALMA, ELEONORA  
**Address:** 435 21ST STREET OFFICE 3  
**City-St-Zip:** MIAMI BEACH, FL 33139 US

**Title:** MGR  
**Name:** PICCHIURA, PIERMASSIMO  
**Address:** 435 21ST STREET OFFICE 3  
**City-St-Zip:** MIAMI BEACH, FL 33139 US

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: PICINELLI GIORGIO      MGRM      04/28/2010

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