

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000053079

**FILED**  
**Apr 05, 2012**  
**Secretary of State**

**Entity Name:** DHD ADVISORY SERVICES LLC

**Current Principal Place of Business:**

1121 CRANDON BLVD.  
D 402  
KEY BISCAYNE, FL 33149 US

**New Principal Place of Business:**

**Current Mailing Address:**

1121 CRANDON BLVD.  
D 402  
KEY BISCAYNE, FL 33149 US

**New Mailing Address:**

**FEI Number:** 27-2638832      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

DAVILA, ROBERT  
1121 CRANDON BVL.D.  
D 402  
KEY BISCAYNE, FL 33149 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:** DAVILA, ROBERT  
**Address:** 1121 CRANDON BLVD., APT. D 402  
**City-St-Zip:** KEY BISCAYNE, FL 33149 US

**Title:** MGRM  
**Name:** NIGAGLIONI, CARMEN  
**Address:** 1121 CRANDON BLVD., APT. D 402  
**City-St-Zip:** KEY BISCAYNE, FL 33149 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: ROBERT DAVILA

MR.

04/05/2012

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