

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000006230

FILED
Feb 10, 2012
Secretary of State

Entity Name: RECAPITALIZATION PARTNERS, L.L.C.

Current Principal Place of Business:

660 HERMITAGE CIRCLE, SUITE 100
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

660 HERMITAGE CIRCLE
SUITE 100
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

660 HERMITAGE CIRCLE, SUITE 100
PALM BEACH GARDENS, FL 33410

New Mailing Address:

660 HERMITAGE CIRCLE
SUITE 100
PALM BEACH GARDENS, FL 33410

FEI Number: 45-4146772

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVIN, JOEL
660 HERMITAGE CIRCLE, SUITE 100
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

LEVINE, JOEL
660 HERMITAGE CIRCLE
SUITE 100
PALM BEACH GARDENS, FL 33410 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: JOEL LEVINE

02/10/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: LEVINE, JOEL
Address: 660 HERMITAGE CIRCLE, SUITE 100
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGR
Name: BERGER, BRUCE
Address: 17 TANNERY LANE N
City-St-Zip: WESTON, CT 06883

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: JOEL LEVINE

MGR

02/10/2012

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