

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059647

FILED
Apr 20, 2009
Secretary of State

Entity Name: GREECOL HOLDINGS LLC

Current Principal Place of Business:

14021 SW 143 CT
#6
MIAMI, FL 33186

New Principal Place of Business:

14272 SW 140 ST
111
MIAMI, FL 33186

Current Mailing Address:

14021 SW 143 CT
#6
MIAMI, FL 33186

New Mailing Address:

14272 SW 140 ST
111
MIAMI, FL 33186

FEI Number: 20-3013486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAGER, RICARDO
14021 SW 143 CT.
#6
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

DAGER, RICARDO
14272 SW 140 ST
111
MIAMI, FL 33186 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: RICARDO DAGER

04/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DAGER, RICARDO
Address: 14021 SW 143 CT. #6
City-St-Zip: MIAMI, FL 33186

Title: MGRM () Delete
Name: DAGER, GABRIEL
Address: 14021 SW 143 CT., #6
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DAGER, RICARDO
Address: 14272 SW 140 ST # 111
City-St-Zip: MIAMI, FL 33186

Title: MGRM (X) Change () Addition
Name: DAGER, GABRIEL
Address: 14272 SW 140 ST # 111
City-St-Zip: MIAMI, FL 33186

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: RICARDO DAGER

MGRM

04/20/2009

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