2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000075588

Entity Name: RG OFFICES, LLC

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1110 BRICKELL AVE., SUITE 402 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

1110 BRICKELL AVE., SUITE 402 MIAMI, FL 33131

FEI Number: 20-3268320 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

REINA, GUILLERMO
610 HARBOR CIRCLE
KEY BISCAYNE, FL 33149 US
REINA, GUILLERMO
1110 BRICKELL AVENUE
402
MIAMI, FL 33131 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

in the State of Florida.

SIGNATURE: 04/27/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: REINA, GUILLERMO
Address: 610 HARBOR CIRCLE

City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGRM () Delete
Name: RESTREPO, MONICA
Address: 610 HARBOR CIRCLE

City-St-Zip: KEY BISCAYNE, FL 33149

 Title:
 MGRM () Delete

 Name:
 REINA, NANCY

 Address:
 330 RIDGEWOOD RD

 City-St-Zip:
 KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition

Name: REINA, GUILLERMO

Address: 1110 BRICKELL AVENUE, SUITE 402

City-St-Zip: MIAMI ,, FL 33131

Title: MGRM (X) Change () Addition

Name: RESTREPO, MONICA

Address: 1110 BRICKELL AVENUE, SUITE 402

City-St-Zip: MIAMI, FL 33131

Title: MGRM (X) Change () Addition

Name: REINA, NANCY
Address: 1110 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

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: GUILLERMO REINA MGR 04/27/2009