

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUN 25 AM 10:59

DOCUMENT # L02000015174
1. Entity Name
 AVENTURA EVERGREEN 3274-0602, LLC

DO NOT WRITE IN THIS SPACE

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|---|---|
| 2. Principal Place of Business 2100 PONCE DE LEON BLVD. Suite, Apt. #, etc. SUITE 600 City & State CORAL GABLES, FL | 3. Mailing Address 2100 PONCE DE LEON BLVD. Suite, Apt. #, etc. SUITE 600 City & State CORAL GABLES, FL |
|---|---|

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| 4. FEI Number APPLIED FOR | Applied For Not Applicable |
|-------------------------------------|--------------------------------------|

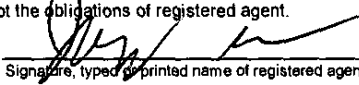
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| 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required |
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DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

| |
|---|
| Name JORGE GURIAN |
| Street Address (P.O. Box Number is Not Acceptable) 2100 PONCE DE LEON BLVD SUITE 600 |
| City CORAL GABLES |
| State FL |
| Zip Code 33134 |

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **DATE** 4/29/03

Signature, typed or printed name of registered agent and title if applicable.

FEE IS \$50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

| | |
|---|--|
| TITLE MGRM | NAME HERNANDEZ, JUAN FRANCISCO |
| STREET ADDRESS 2100 PONCE DE LEON BLVD. SUITE 600 | CITY - ST - ZIP CORAL GABLES, FL 33134 |
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **JUAN FRANCISCO HERNANDEZ** **04/29/03** **305-279-4101**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083B (12/02)