2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 31, 2013
Secretary of State
CC1656577173

DOCUMENT# L05000012978

Entity Name: LAW CENTER OF THE AMERICAS HOLDINGS, LLC

Current Principal Place of Business:

201 SOUTH BISCAYNE BLVD
SUITE 800
MIAMI, FL 33131

Current Mailing Address:

201 SOUTH BISCAYNE BLVD
SUITE 800
MIAMI, FL 33131

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAW CENTER OF THE AMERICAS, LLC
201 SOUTH BISCAYNE BOULEVARD
SUITE 800
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.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGRV	Title	MGRV
Name	HAGEN, STEVEN H	Name	MEYER, JAMES M
Address	201 SOUTH BISCAYNE BLVD. STE 800	Address	201 SOUTH BISCAYNE BLVD. STE 800
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131
Title	MGRP	Title	MGRV
Name	HARPER, GEORGE R	Name	PEREZ, MANUEL A
Address	201 SOUTH BISCAYNE BLVD. STE 800	Address	201 SOUTH BISCAYNE BLVD. STE 800
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131
Title	MGRV	Title	MGRV
Name	O'CONNOR, PATRICK J	Name	ALBERT, RONALD JR.
Address	201 SOUTH BISCAYNE BLVD. STE 800	Address	201 SOUTH BISCAYNE BLVD. STE 800
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131
Title	MGRV		
Name	DRIBIN, MICHAEL A		
Address	201 SOUTH BISCAYNE BLVD SUITE 800		
City-State-Zip:	MIAMI FL 33131		

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GEORGE R. HARPER MGRP 01/31/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date