

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L00000015825

FILED
Oct 28, 2008
Secretary of State**Entity Name:** FOURTEEN FIFTY ONE BRICKELL, L.L.C.**Current Principal Place of Business:**2666 BRICKELL AVE.
MIAMI, FL 33129**New Principal Place of Business:****Current Mailing Address:**2666 BRICKELL AVE.
MIAMI, FL 33129**New Mailing Address:****FEI Number:** 65-1092632**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HEINZ, HUGO
2666 BRICKELL AVE.
MIAMI, FL 33129 US**Name and Address of New Registered Agent:**

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

MANAGING MEMBERS/MANAGERS:**Title:** MGRM () Delete
Name: FORTUNATE INVESTMENT, S, INC.
Address: 2666 BRICKELL AVE.
City-St-Zip: MIAMI, FL 33129**Title:** MGRM () Delete
Name: ROAM INVESTMENTS, IN, C.
Address: 1200 BRICKELL AVE.
City-St-Zip: MIAMI, FL 33131**Title:** MGRM () Delete
Name: ABBEY, INC.,
Address: 3100 N. OCEAN BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33308**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MGRM (X) Change () Addition
Name: RICARDO D'AMATO,
Address: 1200 BRICKELL AVE.
City-St-Zip: MIAMI, FL 33131**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: WALTER DEFORTUNA

MGRM

10/28/2008

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