2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Jun 18, 2009
Secretary of State

DOCUMENT# L01000021028

Entity Name: FLORIDA AV,LLC

Current Principal Place of Business:

15970 W ST. ROAD 84
SUNRISE, FL 33326

New Principal Place of Business:

Current Mailing Address:

15970 W ST. ROAD 84
SUNRISE, FL 33326

New Mailing Address:

FEI Number: 65-1159093 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARELLANO, WILMER
15970 W ST. ROAD 84
SUNRISE, FL 33326 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: ARELLANO, WILMER
Address: 1526 CARDINAL WAY
City-St-Zip: WESTON, FL 33327

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM ( ) Change (X) Addition
Name: ARELLANO, NELSY C
Address: 1526 CARDINAL WAY
City-St-Zip: WESTON, FL 33327

Title: MGRM ( ) Change (X) Addition
Name: ARELLANO, NELSY M
Address: 1526 CARDINAL WAY
City-St-Zip: WESTON, FL 33327

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: WILMER ARELLANO MGRM 06/18/2009

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