

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L02000015189

FILED
May 20, 2008
Secretary of State**Entity Name:** SOBE USA LLC**Current Principal Place of Business:**960 OCEAN DRIVE
MIAMI BEACH, FL 33139**New Principal Place of Business:****Current Mailing Address:**960 OCEAN DRIVE
MIAMI BEACH, FL 33139**New Mailing Address:****FEI Number:** 36-4499928**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GONZALES, PASCAL
960 OCEAN DR
MIAMI BEACH, FL 33139 US**Name and Address of New Registered Agent:**ARRIGHI, ANTHONY
960 OCEAN DR
MIAMI BEACH, FL 33139 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: ARRIGHI ANTHONY

05/20/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** MGRM () Delete
Name: ARRIGHI, CATHERINE
Address: 960 OCEAN DR.
City-St-Zip: MIAMI BEACH, FL 33134**Title:** MGRM () Delete
Name: GONZALES, PASCAL
Address: 960 OCEAN DR.
City-St-Zip: MIAMI BEACH, FL 33134**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MGRM (X) Change () Addition
Name: ARRIGHI, ANTHONY
Address: 960 OCEAN DR.
City-St-Zip: MIAMI BEACH, FL 33134

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: ARRIGHI ANTHONY

MM

05/20/2008

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