

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90016 001 ****50.00

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DOCUMENT # L02000030970 1. Entity Name 801 ARTHUR GODFREY, LLC					
Principal Place of Business 1200 BRICKELL AVENUE, SUITE 1500 MIAMI, FL 33131			Mailing Address 1200 BRICKELL AVENUE, SUITE 1500 MIAMI, FL 33131		
2. Principal Place of Business 801 Arthur Godfrey Road,		3. Mailing Address 801 Arthur Godfrey Road			
Suite, Apt. #, etc. Suite 600		Suite, Apt. #, etc. Suite 600			
City & State Miami Beach, Florida		City & State Miami Beach, Florida			
Zip 33140	Country USA	Zip 33140	Country USA	4. FEI Number 11-3667504	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				04182005 Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent PEARCE, PAM 801 ARTHUR GODFREY ROAD SUITE 600 MIAMI BEACH, FL 33140				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BITTEL, STEPHEN H 1200 BRICKELL AVE SUITE 1500 MIAMI, FL 33131	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Bittel, Stephen H. 801 Arthur Godfrey Road, Ste. 600 Miami Beach, Florida 33140	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER OR AUTHORIZED REPRESENTATIVE					
STEPHEN H. BITTEL				Date _____ Daytime Phone # _____	