

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000000343

1. Entity Name
DIA DORADO- WME1, LLC



Principal Place of Business
22 ROYAL PALM WAY STE. 303
BOCA RATON, FL 33432-7816

Mailing Address
22 ROYAL PALM WAY STE. 303
BOCA RATON, FL 33432-7816



04302008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0999935

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

JACOBY, D. KERRY
2178 WOODLANDS WAY
DEERFIELD BEACH, FL 33442

**DO NOT WRITE
IN THIS SPACE**

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 _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME JACOBY, DAVID E
STREET ADDRESS 22 ROYAL PALM WAY, APT 303
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE MGR
NAME JACOBY, D. KERRY
STREET ADDRESS 2178 WOODLANDS WAY
CITY-ST-ZIP DEERFIELD BEACH, FL 33442

TITLE MGRM
NAME JACOBY, NANCY B
STREET ADDRESS 22 ROYAL PALM WAY, APT. 303
CITY-ST-ZIP BOCA RATON, FL 33432

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U00000943638

05/29/08-60067-016 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

D. Kerry Jacoby D. KERRY JACOBY 24APR08 OVER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #