2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000016442

Entity Name: C.L.D., LLC

FILED Jan 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4000 TOWERSIDE TERRACE 4000 TOWERSIDE TERRACE, UNIT 1502 MIAMI, FL 33138

UNIT 1502 MIAMI, FL 33138

Current Mailing Address: New Mailing Address:

4000 TOWERSIDE TERRACE, UNIT 1502 4000 TOWERSIDE TERRACE

UNIT 1502 MIAMI, FL 33138 MIAMI, FL 33138

FEI Number: 81-0612391 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DIFALCO, ANTHONY G DIFALCO, CHRISTOPHE L

4000 TOWERSIDE TERRACE, UNIT 1502 4000 TOWERSIDE TERRACE, UNIT 1502

MIAMI, FL 33138 MIAMI, FL 33138 US 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: CHRISTOPHE L. DIFALCO 01/28/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Change () Addition () Delete

DIFALCO, CHRISTOPHE L Name: Name: Address: 4000 TOWERSIDE TERRACE, UNIT 1502 Address: City-St-Zip: MIAMI, FL 33138 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

Name: DIFALCO, JACQUELINE S Name: Address: 4000 TOWERSIDE TERRACE, UNIT 1502 Address: City-St-Zip: MIAMI, FL 33138 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: CHRISTOPHE L. DIFALCO **MGRM** 01/28/2009