

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000001838

Entity Name: COHORTE, LLC

FILED
Feb 01, 2009
Secretary of State

Current Principal Place of Business:

C/O JOSE MANUEL ORTEGA
SHIPNET 7-1296
MIAMI, FL 33102 US

New Principal Place of Business:

233 SOUTH FEDERAL HWY
APT. # 704
BOCA RATON, FL 33432 US

Current Mailing Address:

C/O JOSE MANUEL ORTEGA
P.O. BOX 025210
MIAMI, FL 331025210 US

New Mailing Address:

C/O JOSE MANUEL ORTEGA
SHIPNET 7-1296 P.O. BOX 025210
MIAMI, FL 33102 US

FEI Number: 20-0570766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONAHAN, ROARK R CPA
4000 PONCE DE LEON BLVD.
SUITE 470, OFFICE #13
CORAL GABLES, FL 33146 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: ORTEGA COHEN, JOSE M
Address: 233 SOUTH FEDERAL HWY #704
City-St-Zip: BOCA RATON, FL 33432 US

Title: MGRM () Delete
Name: COHEN SANOJA, ASTRID E
Address: 233 SOUTH FEDERAL HWY #704
City-St-Zip: BOCA RATON, FL 33432 US

Title: MGRM () Delete
Name: DE MORENO, MARIA A
Address: 233 SOUTH FEDERAL HWY #704
City-St-Zip: BOCA RATON, FL 33432 US

ADDITIONS/CHANGES:

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

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

Title: () Change () Addition
Name:
Address:
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: ASTRID COHEN SANOJA

MGRM

02/01/2009

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