

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000008087

FILED
Feb 13, 2009
Secretary of State

Entity Name: BEACHLIFE, LLC

Current Principal Place of Business:

2121 PONCE DE LEON BLVD, STE 330
CORAL GABLES, FL 33134

New Principal Place of Business:

1430 S. DIXIE HIGHWAY
SUITE #321
CORAL GABLES, FL 33146

Current Mailing Address:

2121 PONCE DE LEON BLVD, STE 330
CORAL GABLES, FL 33134

New Mailing Address:

1430 S. DIXIE HIGHWAY
SUITE #321
CORAL GABLES, FL 33146

FEI Number: 35-2224561

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTIZ, MICHAEL ESQ
2121 PONCE DE LEON BLVD, STE 330
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

ORTIZ, MICHAEL ESQ
1430 S. DIXIE HIGHWAY
SUITE #321
CORAL GABLES, FL 33146 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: MICHAEL ORTIZ

02/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PAVAN, JUAN MIGUEL
Address: 260 CRANDON BLVD STE 33
City-St-Zip: KEY BISCAWAYNE, FL 33149

Title: MGRM () Delete
Name: BLITTNER, MORGAN
Address: 260 CRANDON BLVD STE 33
City-St-Zip: KEY BISCAWAYNE, FL 33149

ADDITIONS/CHANGES:

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: MICHAEL ORTIZ

RA

02/13/2009

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