

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000042433

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: SAMUEL HEMINGWAY, LLC

**Current Principal Place of Business:**

% MICHAEL SAMUEL  
3110 NE 2ND AVENUE  
MIAMI, FL 33137

**New Principal Place of Business:**

3401 N MIAMI AVE  
STE 240  
MIAMI, FL 33127

**Current Mailing Address:**

% MICHAEL SAMUEL  
3110 NE 2ND AVENUE  
MIAMI, FL 33137

**New Mailing Address:**

3401 N MIAMI AVE  
STE 240  
MIAMI, FL 33127

FEI Number: 20-1181663

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SAMUEL, MICHAEL  
3110 NE 2ND AVENUE  
MIAMI, FL 33137 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: MGR ( ) Delete  
Name: SAMUEL, MICHAEL  
Address: 3110 NE 2ND AVENUE  
City-St-Zip: MIAMI, FL 33137

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SAMUEL, MICHAEL  
Address: 3401 N MIAMI AVE STE 240  
City-St-Zip: MIAMI, FL 33127

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 SAMUEL

MGR

01/16/2009

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