

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000051879

Entity Name: AMLA CONSULTING LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

407 LINCOLN RD
2-F
MIAMI BEACH, FL 33139

New Principal Place of Business:

407 LINCOLN RD
2-C
MIAMI BEACH, FL 33139

Current Mailing Address:

407 LINCOLN RD
2-F
MIAMI BEACH, FL 33139

New Mailing Address:

407 LINCOLN RD
2-C
MIAMI BEACH, FL 33139

FEI Number: 20-1430157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANGEL, BEATRICE E
407 LINCOLN RD
2-F
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

RANGEL, BEATRICE E
5900 COLLINS AVENUE #1207
MIAMI BEACH, FL 33140 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: BEATRICE E RANGEL

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RANGEL, BEATRICE
Address: 5900 COLLINS AVENUE #1207
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM () Delete
Name: GARCIA PRINCE, ROBERTO
Address: 1920 ASPEN LANE
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: GARCIA PRINCE, ROBERTO
Address: 1920 ASPEN LANE
City-St-Zip: WESTON, FL 33327

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: BEATRICE E RANGEL

MGRM

04/28/2009

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