

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056269

FILED
Jan 08, 2009
Secretary of State

Entity Name: WYNWOOD INVESTMENTS, L.L.C.

Current Principal Place of Business:

120 SE 5TH AVE. APT. 218
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

120 SE 5TH AVE. APT. 218
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 51-0516791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOK, ROBERT A ESQ.
2875 NE 191ST STREET, SUITE 304
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

ISRAEL, JOEL
120 SE 5TH AVE.
218
BOCA RATON, FL 33432 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: JOEL ISRAEL

01/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ISRAEL, JOEL
Address: 120 SOUTHEAST 5TH AVENUE SUITE 218
City-St-Zip: BOCA RATON, FL 33432

Title: MGRM () Delete
Name: CERTIFICATE INVESTME, NT PARTNERS, L L C
Address: 2875 NE 191 STREET, STE. 304
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ISRAEL, JOEL
Address: 120 SOUTHEAST 5TH AVENUE APT 218
City-St-Zip: BOCA RATON, FL 33432

Title: MGRM (X) Change () Addition
Name: GOER, STACEY
Address: 120 SE 5TH AVE. APT.218
City-St-Zip: BOCA RATON, FL 33432

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: JOEL ISRAEL

MGR

01/08/2009

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