2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044817

Entity Name: ARCO LLC

FILED Feb 12, 2008 Secretary of State

Certificate of Status Desired (X)

Current Principal Place of Business: New Principal Place of Business:

210 174TH STREET 19122 NW 12 CT

619 PEMBROKE PINES, FL 33029 US

SUNNY ISLES, FL 33160 US

FEI Number: 20-2791960

Current Mailing Address: New Mailing Address:

210 174TH STREET 19122 NW 12 CT

FEI Number Applied For ()

619 PEMBROKE PINES, FL 33029 US

SUNNY ISLES, FL 33160 US

FEI Number Not Applicable ()

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

GITNACHT, ADRIANA TORRES, ALEJANDRO A

210 174TH STREET 19122 NW 12 CT

619 PEMBROKE PINES, FL 33029 US SUNNY ISLES, FL 33160 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: ALEJANDRO A. TORES 02/12/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Fitle: MGRM () Delete Title: MGRM (X) Change () Addition

Name: GITNACHT, ADRIANA Name: TORRES, ALEJANDRO A
Address: 210 174TH STREET 619 Address: 19122 NW 12 CT

City-St-Zip: SUNNY ISLES, FL 33160 US City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGRM () Delete Title: VP (X) Change () Addition

 Name:
 DARDIK, ADRIANA REBECA
 Name:
 DONA, KERY B

 Address:
 210 174TH STREET 619
 Address:
 19122 NW 12 CT

City-St-Zip: SUNNY ISLES, FL 33160 US City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 COHEN, GUSTAVO
 Name:

 Address:
 210 174TH STREET 619
 Address:

 City-St-Zip:
 SUNNY ISLES, FL 33160 US
 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: ALEJANDRO A. TORRES MGRM 02/12/2008