

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000046491

Entity Name: HMC V LLC

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

CRA 19 A # 118-84
BOGOTA, COLOMBIA, . .

New Principal Place of Business:

Current Mailing Address:

5805 BLUE LAGOON DR
SUITE 200
MIAMI, FL 33126 US

New Mailing Address:

FEI Number: 20-3376287 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AG CORPORATE SERVICES,LLC
5805 BLUE LAGOON DRIVE
SUITE 200
MIAMI, FL 33126 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: MGRM () Delete
Name: MONTENEGRO FONSECA, GUSTAVO ALVARO
Address: CRA 19 A # 118-84
City-St-Zip: BOGOTA, COLOMBIA, . .

Title: MGRM () Delete
Name: MONTENEGRO CAJIGAS, GUSTAVO ANDRES
Address: CRA 19 A # 118-84
City-St-Zip: BOGOTA, COLOMBIA, . .

Title: MGRM () Delete
Name: MONTENEGRO CAJIGAS, CAMILO
Address: CRA 19 A # 118-84
City-St-Zip: BOTOGA, COLOMBIA, . .

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: MONTENEGRO CAJIGAS, CAMILO
Address: CRA 19 A # 118-84
City-St-Zip: BOGOTA, COLOMBIA, . .

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: GUSTAVO ALVARO MONTENEGRO

MGRM

04/16/2009

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