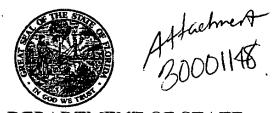
2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Secretary of State DOCUMENT # L05000048160 02-10-2006 90167 017 ****50 00 1. Entity Name ARC DEVELOPERS, LLC Principal Place of Business Mailing Address 1401 PONCE DE LEON BLVD STE 200 CORAL GABLES FL 33134 1401 PONCE DE LEON BLVD STE 200 CORAL GABLES FL 33134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) City & State City & State 4. FEI Number Applied For 11-3750009 Not Applicable Zio Country Country \$5.00 Additional 5. Certificate of Status Desired Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LAW OFFICES OF CARRILLO & CARRILLO, P.A. Street Address (P.O. Box Number is Not Acceptable) 1401 PONCE DE LEON BLVD STE 200 CORAL GABLES FL 33134 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent (NOTE: Registered Agent significal required when remotating DATE FILE NOW!!! FEE IS \$50:00 Make Check Payable to Florida Department of State. Due By May 1, 2006 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES Signa Capital Pertnesselle 1401 Ponce De Leon Blud. TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS Suite 200 Cond Gables CITY-ST-ZIP CITY-ST-ZIP THILE Florida 3317A ☐ Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P TITLE Change CLM Investments, LLC Detere ■ Addition NAME -55-50 W. Glagler Street Suite 116 miami EL 37144 STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition THE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-ZIP nne Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP Change Delete TITLE ☐ Addition TITLE HAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-7IP 11. 1 hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 or ipowered to execute this report as required by Chapter 508, Florida Statutes.

FILED Feb 27, 2006 8:00 am



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 14, 2006

ARC DEVELOPERS, LLC 1401 PONCE DE LEON BLVD STE 200 CORAL GABLES, FL 33134

Subject: ARC DEVELOPERS, LLC

Reference Number:

L05000048160

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Provide the title(s) of each manager, managing member or principal listed on the report or on an attachment.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/cj ANNUAL REPORTS SECTION