# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Mar 30, 2010**
**Secretary of State**

DOCUMENT# L05000050439

**Entity Name:** ARPACILAR PROPERTIES III, L.L.C.

**Current Principal Place of Business:**

435 NORTH ANDREWS AVENUE, STE 2
FT. LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

435 NORTH ANDREWS AVENUE, STE 2
FT. LAUDERDALE, FL 33301

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

ARPACILAR, MAHMUT
435 NORTH ANDREWS AVENUE, STE 2
FT. LAUDERDALE, FL 33301 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
Name: ARPACILAR, MAHMUT
Address: 435 NORTH ANDREWS AVENUE, STE 2
City-St-Zip: FT. LAUDERDALE, FL 33301

I hereby 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 Statues.

SIGNATURE: MAHMUT ARPACILAR MGRM 03/30/2010

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