

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062274

FILED
Aug 12, 2009
Secretary of State

Entity Name: FAMVIL INVESTMENTS OF FLORIDA, L.L.C.

Current Principal Place of Business:

1820 NORTH CORPORATE LAKES BLVD
SUITE 304
WESTON, FL 33326 US

New Principal Place of Business:

1200 BRICKELL AVENUE
SUITE 505
MIAMI, FL 33131 US

Current Mailing Address:

1820 NORTH CORPORATE LAKES BLVD
SUITE 304
WESTON, FL 33326 US

New Mailing Address:

1200 BRICKELL AVENUE
SUITE 505
MIAMI, FL 33131 US

FEI Number: 26-2579533 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MARRERO, JOSE C
1820 NORTH CORPORATE LAKES BLVD
SUITE 304
WESTON, FL 33326 US

Name and Address of New Registered Agent:

MARRERO, JOSE C
1200 BRICKELL AVENUE
SUITE 505
MIAMI, FL 33131 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: JOSE C. MARRERO, ESQ.

08/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: VILLA, RENE
Address: 1820 NORTH CORPORATE LAKES BLVD., #304
City-St-Zip: WESTON, FL 33326 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: VILLA, RENE
Address: 1200 BRICKELL AVENUE SUITE 505
City-St-Zip: MIAMI, FL 33131 US

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: RENE VILLA

MGMR

08/12/2009

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