

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000081087

FILED
May 06, 2008
Secretary of State**Entity Name:** WEST ARCADE, LLC**Current Principal Place of Business:**18400 N.W. 75 PLACE, SUITE 123
MIAMI, FL 33105**New Principal Place of Business:**18400 N.W. 75 PLACE, SUITE 123
MIAMI, FL 33015**Current Mailing Address:**18400 N.W. 75 PLACE, SUITE 123
MIAMI, FL 33105**New Mailing Address:**18400 N.W. 75 PLACE, SUITE 123
MIAMI, FL 33015**FEI Number:** 20-3320677**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MOREJON, ANDRENIER
18400 N.W. 75 PLACE, SUITE 123
MIAMI, FL 33105 US**Name and Address of New Registered Agent:**MOREJON, ANDRENIER
18400 N.W. 75 PLACE, SUITE 123
MIAMI, FL 33015 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:

05/06/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** MGRM () Delete
Name: MOREJON, ANDRENIER
Address: 18400 N.W. 75 PLACE, SUITE 123
City-St-Zip: MIAMI, FL 33105**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MGRM () Change (X) Addition
Name: RIVERA, RAUDEL
Address: 18400 N.W. 75 PLACE, SUITE 123
City-St-Zip: MIAMI, FL 33015

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: RAUDEL RIVERA

MGRM

05/06/2008

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