

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000093550

FILED
Dec 01, 2009
Secretary of State**Entity Name:** CARRAVEN, LLC**Current Principal Place of Business:**1001 BRICKELL BAY DR
#3104
MIAMI, FL 33131**New Principal Place of Business:**2665 S. BAYSHORE DR
SUITE 801
MIAMI, FL 33133**Current Mailing Address:**1001 BRICKELL BAY DR
#3104
MIAMI, FL 33131**New Mailing Address:**2665 S. BAYSHORE DR
SUITE 801
MIAMI, FL 33133**FEI Number:** 20-3518259**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DAVOS FINANCIAL ADVISORS LLC
1001 BRICKELL BAY DR
3104
MIAMI, FL 33131 US**Name and Address of New Registered Agent:**DAVOS FINANCIAL ADVISORS LLC
2665 S. BAYSHORE DR
SUITE 801
MIAMI, FL 33133 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: NAEMAR BELTRAN

12/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:Title: MGR () Delete
Name: MONTIEL, ISABEL D OSIO
Address: 1001 BRICKELL BAY DR
City-St-Zip: MIAMI, FL 33131Title: MGR () Delete
Name: DAVID, OSIO
Address: 1001 BRICKELL BAY DR
City-St-Zip: MIAMI, FL 33131Title: MGR () Delete
Name: ISABEL, OSIO
Address: 1001 BRICKELL BAY DR
City-St-Zip: MIAMI, FL 33131Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:**Title: MGR (X) Change () Addition
Name: MONTIEL, ISABEL D OSIO
Address: 2665 S. BAYSHORE DR SUITE 801
City-St-Zip: MIAMI, FL 33133Title: MGR (X) Change () Addition
Name: DAVID, OSIO
Address: 2665 S. BAYSHORE DR SUITE 801
City-St-Zip: MIAMI, FL 33133Title: MGR (X) Change () Addition
Name: ISABEL, OSIO
Address: 2665 S. BAYSHORE DR SUITE 801
City-St-Zip: MIAMI, FL 33133Title: SEC () Change (X) Addition
Name: DE GREGORIO, ROXANNA
Address: 2665 S. BAYSHORE DR SUITE 801
City-St-Zip: MIAMI, FL 33133

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: DAVID OSIO

MGR

12/01/2009

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