

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000102664

Entity Name: NOVIMARI TUSCANY, LLC

FILED
Sep 07, 2006
Secretary of State

Current Principal Place of Business:

656 N. FEDERAL HWY
FORT LAUDERDALE, FL 33304 US

New Principal Place of Business:

Current Mailing Address:

656 N. FEDERAL HWY
FORT LAUDERDALE, FL 33304 US

New Mailing Address:

FEI Number: 20-3657755 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:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

MATINI, STEFANO
2740 NE 10TH AVE
WILTON MANORS, FL 33334 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: STEFANO MATINI

09/07/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MATINI, STEFANO
Address: 2740 NE 10TH AVE
City-St-Zip: WILTON MANORS, FL 33334 US

Title: MGRM () Delete
Name: NICCOLINI, ILARIA
Address: 128 CHESTNUT STREET
City-St-Zip: BROOKLINE, MA 02445 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: NICCOLINI, ILARIA
Address: 4420 NW 36TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605 US

I hereby certify that the information supplied with this filing does not qualify for the 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: STEFANO MATINI

MGRM

09/07/2006

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