

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109778

Entity Name: HUDSON AVENUE, LLC

FILED
Feb 15, 2009
Secretary of State

Current Principal Place of Business:

1023 BOCA COVE LANE
HIGHLAND BEACH, FL 334874242

New Principal Place of Business:

Current Mailing Address:

1023 BOCA COVE LANE
HIGHLAND BEACH, FL 334874242

New Mailing Address:

FEI Number: 41-2159654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKBASLI, SEYHAN
1023 BOCA COVE LANE
HIGHLAND BEACH, FL 334874242 US

Name and Address of New Registered Agent:

FERNANDES, ALBANY
1023 BOCA COVE LANE
HIGHLAND BEACH, FL 334874242 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: ALBANY FERNANDES

02/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: AKBASLI, SEYHAN
Address: 1023 BOCA COVE LANE
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: MGRM () Delete
Name: FERNANDES, ALBANY
Address: 1115 BEDLAR DRIVE SUITE 4
City-St-Zip: HIGHLAND BEACH, FL 33487

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: AKBASLI, RITA
Address: 1023 BOCA COVE LANE
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: MGRM (X) Change () Addition
Name: FERNANDES, ALBANY
Address: 1023 BOCA COVE LANE
City-St-Zip: HIGHLAND BEACH, FL 33487

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: ALBANY FERNANDES

RA

02/15/2009

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