¹ 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000114049

1. Entity Name
DORA BAY, LLC



FILED Apr 30, 2008 08:00 AN Secretary of State

Principal Place of Business

605 LINCOLN RD. 5TH FLOOR

MIAMI BEACH, FL 33139

Mailing Address

605 LINCOLN RD. 5TH FLOOR

MIAMI BEACH, FL 33139



02122008 No Chg-LLC

CR2E083 (12/07)

	the state of the s	 	
4.	FEI Number		Applied For
_	20-3868138		Not Applicable
5.	Certificate of Status Desired	\$5.00 Fee Re	Additional

6. Name and Address of Current Registered Agent

LAZAR, BRUCE E 605 LINCOLN RD. 5TH FLOOR MIAMI BEACH EL 33139

SIGNATURE:

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5TH FLOC MIAMI BE	DR ACH, FL 33139	IN THIS SPACE
	named entity submits this statement for the purpose of changing ions of registered agent.	its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and little if applicable (N	IOTE: Registered Agent signature required when reinstating) OATE
	: NOWIII FEE IS \$138.75 y 1, 2008 Fee will be \$538.75	U00000935853 05/23/08-80088-013 138.75
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOWENSTEIN-BOAND, PAULA 605 LINCOLN RD- 5TH FLOOR MIAMI BEACH, FL 33139	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby indicated limited lia	certify that the information supplied with this filing does not qualify on this report is true and accurate and that my signature shall readily company or the receiver or trustee empowered to execute	fy for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information have the same legal effect as if made under oath; that I am a managing member or manager of the this report as required by Chapter 608, Florida Statutes. A LOWENSTEIN BOADO

JRE: MANACION MEMBER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE