

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000115273

Entity Name: BENLIV, LLC

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

2300 BARCELONA DRIVE
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

2300 BARCELONA DRIVE
FORT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 20-3870816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARKUS, GLENN
2300 BARCELONA DRIVE
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

PALMER, TONY
PALMER, LUGO & OLEA, P.A.
5353 N. FEDERAL HWY, SUITE 207
FORT LAUDERDALE, FL 33308 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: TONY PALMER

01/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: MARKUS, GLENN
Address: 2300 BARCELONA DR
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: V () Delete
Name: MARKUS, ALANA
Address: 2300 BARCELONA DR
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MARKUS, GLENN
Address: 2300 BARCELONA DR
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGRM (X) Change () Addition
Name: MARKUS, ALANA
Address: 2300 BARCELONA DR
City-St-Zip: FORT LAUDERDALE, FL 33301

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: ALANA MARKUS

MGRM

01/14/2009

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