

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000005104

Entity Name: KLCME, L.L.C.

**FILED**  
**Feb 08, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

8360 WEST FLAGLER STREET, SUITE #200  
MIAMI, FL 33144

**New Principal Place of Business:**

8360 WEST FLAGLER STREET  
200  
MIAMI, FL 33144 US

**Current Mailing Address:**

8360 WEST FLAGLER STREET, SUITE #200  
MIAMI, FL 33144

**New Mailing Address:**

8360 WEST FLAGLER STREET  
200  
MIAMI, FL 33144 US

FEI Number: 20-8931833

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BROLLEY, MARIA T  
8360 WEST FLAGLER STREET, SUITE #200  
MIAMI, FL 33144 US

**Name and Address of New Registered Agent:**

BROLLEY, MARIA T  
8360 WEST FLAGLER STREET  
200  
MIAMI, FL 33144 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:

02/08/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: RIOS, LUIS  
Address: 8360 WEST FLAGLER ST SUITE 200  
City-St-Zip: MIAMI, FL 33144 US

I hereby 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: LUIS O RIOS

MGR

02/08/2010

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