

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L06000007460

**FILED**  
**Oct 14, 2009**  
**Secretary of State****Entity Name:** MUTINY GROVE GARAGE, LLC**Current Principal Place of Business:**425 EAST 61 STREET, 4TH FLOOR  
NEW YORK, NY 10065**New Principal Place of Business:****Current Mailing Address:**425 EAST 61 STREET, 4TH FLOOR  
NEW YORK, NY 10065**New Mailing Address:****FEI Number:** 20-4207473**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**GENET, CHAVA E  
150 WEST FLAGLER STREET  
MUSEUM TOWER, SUITE 2200  
MIAMI, FL 33130 US**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: THE 1995 EVAN I. SOBER IRREVOCABLE TRUST  
Address: 425 EAST 61ST ST  
City-St-Zip: NEW YORK, NY 10021

Title: VP ( ) Delete  
Name: MARRELL, GARY R  
Address: 425 EAST 61ST STREET--4TH FLOOR  
City-St-Zip: NEW YORK, NY 10065

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MUTINY GROVE GARAGE MEMBER, LLC  
Address: 425 EAST 61ST ST., 4TH FL  
City-St-Zip: NEW YORK, NY 10065

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

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: GARY MARRELL

VP

10/14/2009

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