


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

01-11-2007 90133 021 ***150.00

DOCUMENT # L06000013762					
1. Entity Name THIRD STREET, LLC					
Principal Place of Business 25 S.E. 2ND AVENUE, SUITE 750 MIAMI, FL 33131			Mailing Address 25 S.E. 2ND AVENUE, SUITE 750 MIAMI, FL 33131		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
KAPUSTIN, RAFAEL 25 S.E. 2ND AVENUE, SUITE 750 MIAMI, FL 33131				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL	Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of filer (if not filer), and filer's title (if not filer) (Registered Agent signature and title not required)</small>					
Filing Fee is \$50.00 Due by May 1, 2007			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS					
TITLE	MGR : <input type="checkbox"/> Delete				
NAME	KAPUSTIN, RAFAEL				
STREET ADDRESS	25 S.E. 2ND AVENUE, SUITE 750				
CITY-ST-ZIP	MIAMI, FL 33131				
TITLE	MGR <input type="checkbox"/> Delete				
NAME	KAPUSTIN, SARA				
STREET ADDRESS	25 S.E. 2ND AVENUE, SUITE 750				
CITY-ST-ZIP	MIAMI, FL 33131				
TITLE	MGR <input type="checkbox"/> Delete				
NAME	KAPUSTIN, ANDREW JAY				
STREET ADDRESS	25 S.E. 2ND AVENUE, SUITE 750				
CITY-ST-ZIP	MIAMI, FL 33131				
TITLE	MGR <input type="checkbox"/> Delete				
NAME	KAPUSTIN, GINA EVE				
STREET ADDRESS	25 S.E. 2ND AVENUE, SUITE 750				
CITY-ST-ZIP	MIAMI, FL 33131				
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
10. ADDITIONS/CHANGES					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u>Rafael Kapustin</u> 1/4/07 305371-9090					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					

30000451



01042007 Chg-LLC CR2E083 (12/06)

FEEL Number: 00-4262788 Applied For: ☐ Not Applicable

ATTACHMENT

X



DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
P.O. BOX 9003
HOLTSVILLE NY 11742-9003

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L06000013762

002966.267281.0011.001 1 MB 0.326 690

THIRD STREET LLC
RAFAEL KAPUSTIN MBR
25 SE 2ND AVENUE SUITE 750
MIAMI FL 33131

Date of this notice: 02-14-2006

Employer Identification Number:
20-4262788

Form: SS-4

Number of this notice: CP 575 B

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 20-4262788. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, please use the label we provided. If this isn't possible, it is very important that you use your EIN and complete name and address exactly as shown above on all federal tax forms, payments and related correspondence. Any variation may cause a delay in processing, result in incorrect information in your account or even cause you to be assigned more than one EIN. If the information isn't correct as shown above, please correct it using tear off stub from this notice and return it to us so we can correct your account.

Based on the information from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065

04/15/2007

If you have questions about the form(s) or the due dates(s) shown, you can call or write to us at the phone number or address at the top of the first page of this letter. If you need help in determining what your tax year is, see Publication 536, Accounting Periods and Methods, available at your local IRS office or you can download this Publication from our Web site at www.irs.gov.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination on your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue.)