2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000025090

Entity Name: CFM INTERNATIONAL, LLC

FILED Jan 22, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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9240 BONITA BEACH ROAD 180 N WABASH AVE

SUITE 1105 SUITE 625

BONITA SPRINGS, FL 34134 US CHICAGO, IL 60601 US

Current Mailing Address: New Mailing Address:

9240 BONITA BEACH ROAD 180 N WABASH AVE

SUITE 1105 SUITE 625

BONITA SPRINGS, FL 34134 US CHICAGO, IL 60601 US

FEI Number: 20-4457094 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BARTHEL, JAMES A WRIGHT, DAVID E
9240 BONITA BEACH ROAD 180 N WABASH AVE
SUITE 1105 SUITE 625
BONITA SPRINGS, FL 34134 US CHICAGO, FL 60601 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: MR DAVID WRIGHT 01/22/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Name: BARTHEL, JAMES Name: WRIGHT, DAVID E
Address: 9240 BONITA BEACH ROAD SUITE 1105 Address: 180 N WABASH AVE, SUITE 625

City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: CHICAGO, IL 60601

Title: () Delete Title: MR () Change (X) Addition

 Name:
 Name:
 WILLIAMS, EMMETT M

 Address:
 Address:
 180 N WABASH AVE, SUITE 625

City-St-Zip: City-St-Zip: CHICAGO, IL 60601

Title: () Delete Title: MR () Change (X) Addition

Name: BEALE, NICHOLAS W

Address: Address: 450 E WATERSIDE DRIVE, APPT 504

City-St-Zip: City-St-Zip: CHICAGO, IL 60601

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: DAVID WRIGHT MR 01/22/2009