

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000025934

Entity Name: MYNT HOSPITALITY, LLC

FILED  
Feb 21, 2008  
Secretary of State

## Current Principal Place of Business:

659 MERIDIAN AVENUE  
SUITE 10  
MIAMI BEACH, FL 33139 US

## Current Mailing Address:

659 MERIDIAN AVENUE  
SUITE 10  
MIAMI BEACH, FL 33139 US

FEI Number: 56-2596911

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TORCHIO, MARISSA  
659 MERIDIAN AVENUE  
SUITE 10  
MIAMI BEACH, FL 33139 US

## New Principal Place of Business:

20335 WEST COUNTRY CLUB DRIVE  
APARTMENT 402  
AVENTURA, FL 33180 US

## New Mailing Address:

20335 WEST COUNTRY CLUB DRIVE  
APARTMENT 402  
AVENTURA, FL 33180 US

## Name and Address of New Registered Agent:

TORCHIO, MARISSA  
20335 WEST COUNTRY CLUB DRIVE  
APARTMENT 402  
AVENTURA, FL 33180 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: MARISSA TORCHIO

02/21/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: TORCHIO, MARISSA  
Address: 659 MERIDIAN AVENUE, SUITE 10  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: TORCHIO, MARISSA  
Address: 20335 WEST COUNTRY CLUB DRIVE APT 402  
City-St-Zip: AVENTURA, FL 33180

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: MARISSA TORCHIO

PRES

02/21/2008

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