

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000032350

Entity Name: TCL HOLDINGS, LLC

FILED  
Apr 05, 2009  
Secretary of State

## Current Principal Place of Business:

11900 BISCAYNE BOULEVARD  
SUITE 280  
MIAMI, FL 33181

## New Principal Place of Business:

150 SE 2ND AVENUE  
SUITE 901  
MIAMI, FL 33131

## Current Mailing Address:

11900 BISCAYNE BOULEVARD  
SUITE 280  
MIAMI, FL 33181

## New Mailing Address:

150 SE 2ND AVENUE  
SUITE 901  
MIAMI, FL 33131

FEI Number: 26-0545603

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LIMITED AGENT SERVICES, LLC  
11900 BISCAYNE BOULEVARD  
SUITE 280  
MIAMI, FL 33181 US

## Name and Address of New Registered Agent:

LIMITED AGENT SERVICES, LLC  
150 SE 2ND AVENUE  
SUITE 901  
MIAMI, FL 33131 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: STEFANIE BLACK LEWIS

04/05/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: LEWIS, STEFANIE B  
Address: 11900 BISCAYNE BOULEVARD, SUITE 280  
City-St-Zip: MIAMI, FL 33181

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: LEWIS, STEFANIE B  
Address: 150 SE 2ND AVENUE, SUITE 901  
City-St-Zip: MIAMI, FL 33131

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: STEFANIE BLACK LEWIS

MGR

04/05/2009

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