

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L06000078142

**FILED**  
**Sep 21, 2009**  
**Secretary of State****Entity Name:** RIACONLINE, LLC**Current Principal Place of Business:**19494 SW 60TH COURT  
PEMBROKE PINES, FL 33332**New Principal Place of Business:****Current Mailing Address:**2853 EXECUTIVE PARK DRIVE  
SUITE 105  
WESTON, FL 33331**New Mailing Address:**19494 SW 60TH COURT  
PEMBROKE PINES, FL 33332**FEI Number:** 84-1715271**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MYOS FINANCIAL GROUP, INC.  
2853 EXECUTIVE PARK DR  
SUITE 105  
WESTON, FL FL 33331 US**Name and Address of New Registered Agent:**RIANO, HISSHALA  
19494 SW 60TH COURT  
PEMBROKE PINES, FL 33332 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: HISSHALA RIANO PAVA

09/21/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CARO TRUJILLO, JOSE F  
Address: AVENIDA 147 NO. 11-86  
City-St-Zip: BOGOTA , COLOMBIA, CO 00000 CO

Title: MGRM ( ) Delete  
Name: RIANO PAVA, ANGELO N  
Address: AVENIDA 147 NO. 11-86  
City-St-Zip: BOGOTA, COLOMBIA, CO 00000 CO

Title: MGRM ( ) Delete  
Name: RIANO PAVA, HISSHALA  
Address: AVENIDA 147 NO. 20-50  
City-St-Zip: BOGOTA, COLOMBIA, CO 00000 CO

**ADDITIONS/CHANGES:**

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

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

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: HISSHALA RIANO PAVA

MGRM

09/21/2009

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