

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000113438

FILED  
Mar 29, 2009  
Secretary of State

Entity Name: PRIVATE WEALTH FAMILY OFFICE LLC

## Current Principal Place of Business:

3059 GRAND AVENUE STE 330  
MIAMI, FL 33133

## New Principal Place of Business:

75 VALENCIA AVENUE  
#801  
CORAL GABLES, FL 33134

## Current Mailing Address:

3059 GRAND AVENUE STE 330  
MIAMI, FL 33133

## New Mailing Address:

75 VALENCIA AVENUE  
#801  
CORAL GABLES, FL 33134

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RODRIGUEZ, CHRISTIAN A  
3059 GRAND AVE  
330  
MIAMI, FL 33133 US

## Name and Address of New Registered Agent:

RODRIGUEZ, CHRISTIAN A  
75 VALENCIA AVENUE  
#801  
CORAL GABLES, FL 33134 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:

03/29/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: RODRIGUEZ, CHRISTIAN A  
Address: 220 LEUCADENDRA DRIVE  
City-St-Zip: CORAL GABLES, FL 33156

Title: MGR ( ) Delete  
Name: HURTADO, JOSE A  
Address: 16171 BLATT BLVD. #404  
City-St-Zip: WESTON, FL 33326

## ADDITIONS/CHANGES:

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: CHIRSTIAN A. RODRIGUEZ

MGRM

03/29/2009

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