

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000004163

Entity Name: 341 HOLDINGS GROUP, LLC

FILED
Jun 21, 2008
Secretary of State

Current Principal Place of Business:

1000 WEST AVENUE
#1011
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1000 WEST AVENUE
#1011
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CRAWFORD, VALERIE
1200 WEST AVENUE
#1404
MIAMI BEACH, FL 33139 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AYERS, AMANI
Address: 1000 WEST AVENUE - #1011
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR () Delete
Name: CRAWFORD, VALERIE
Address: 1200 WEST AVENUE - #1404
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR () Delete
Name: LENNON, SHIRLEY
Address: 213 PLATT AVENUE
City-St-Zip: WRIGHTSTOWN, NJ 08562

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: VALERIE CRAWFORD

MGR

06/21/2008

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