

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000007387

Entity Name: SURA LLC

FILED
May 20, 2009
Secretary of State

Current Principal Place of Business:

2665 SW 37TH AVENUE
1412
MIAMI, FL 33133

New Principal Place of Business:

950 BRICKELL BAY DRIVE
5309
MIAMI, FL 33131

Current Mailing Address:

2665 SW 37TH AVENUE
1412
MIAMI, FL 33133

New Mailing Address:

950 BRICKELL BAY DRIVE
5309
MIAMI, FL 33131

FEI Number: 41-2226595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TITIZ, YELIZ
2665 SW 37TH AVENUE
1412
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

TITIZ, YELIZ
950 BRICKELL BAY DRIVE
5309
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:

05/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TITIZ, YELIZ
Address: 2665 SW 37TH AVENUE, # 1412
City-St-Zip: MIAMI, FL 33133

Title: MGRM () Delete
Name: BAHCIANOGLU, MURAT
Address: 2665 SW 37TH AVENUE, # 1412
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TITIZ, YELIZ
Address: 950 BRICKELL BAY DRIVE, # 5309
City-St-Zip: MIAMI, FL 33131

Title: MGRM (X) Change () Addition
Name: BAHCIANOGLU, MURAT
Address: 950 BRICKELL BAY DRIVE, # 5309
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: YELIZ TITIZ

AGEN

05/20/2009

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