

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000016123

FILED
Jun 16, 2008
Secretary of State**Entity Name:** LORENZO RECOVERY LLC**Current Principal Place of Business:**1850 SW 8TH STREET
206
MIAMI, FL 33135**New Principal Place of Business:****Current Mailing Address:**1850 SW 8TH STREET
206
MIAMI, FL 33135**New Mailing Address:****FEI Number:** 33-1153226**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROBLES, MARIA
1850 SW 8TH ST
206
MIAMI, FL 33135 US**Name and Address of New Registered Agent:**TORRES, MILEYDIS
1850 SW 8TH ST
206
MIAMI, FL 33135 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: MILEYDIS TORRES

06/16/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** PRDT () Delete
Name: ROBLES, MARIA
Address: 1850 SW 8TH ST, SUITE 206
City-St-Zip: MIAMI, FL 33135**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:****Title:** PRDT (X) Change () Addition
Name: LORENZO ALFONSO, YAMILE
Address: 1850 SW 8TH ST, SUITE 206
City-St-Zip: MIAMI, FL 33135**Title:** MGRM () Change (X) Addition
Name: TORRES, MILEYDIS
Address: 1850 SW 8TH STREET SUITE 206
City-St-Zip: MIAMI, FL 33135

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: YAMILE LORENZO ALFONSO

PRDT

06/16/2008

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