

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000019387

FILED
Apr 30, 2009
Secretary of State

Entity Name: BLACKFRIARS MANAGEMENT US, LLC

Current Principal Place of Business:

90 SE 4TH AVE
1
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

90 SE 4TH AVE
1
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 20-8597203

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOTLER, MICHAEL I
54 SW BOCA RATON BLVD
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

CLIFFORD, MALORY
1034 SOUTH OCEAN BLVD
DELRAY BEACH, FL 33483 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: MALORY CLIFFORD

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CLIFFORD, MALORY
Address: 2115 S OCEAN BOULEVARD, UNIT 16
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CLIFFORD, MALORY
Address: 1034 SOUTH OCEAN BLVD
City-St-Zip: DELRAY BEACH, FL 33483

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: MALORY CLIFFORD

MGR

04/30/2009

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