

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000047702

Entity Name: SUTTON & SOTO, LLC

FILED
Jan 26, 2009
Secretary of State

Current Principal Place of Business:

GABLES INTERNATIONAL PLAZA, PH2C
2655 S. LEJEUNE ROAD
CORAL GABLES, FL 33134

New Principal Place of Business:

GABLES INTERNATIONAL PLAZA, PH2C
2655 S. LEJEUNE ROAD PH # 2
CORAL GABLES, FL 33134

Current Mailing Address:

GABLES INTERNATIONAL PLAZA, PH2C
2655 S. LEJEUNE ROAD
CORAL GABLES, FL 33134

New Mailing Address:

GABLES INTERNATIONAL PLAZA, PH2C
2655 S. LEJEUNE ROAD PH # 2
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:

SOTO, OSVALDO N
2655 S. LEJEUNE ROAD, PH-2C
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: MGRM () Delete
Name: SUTTON, JOHN O
Address: GABLES INTERNATIONAL PLAZA, PH2C
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: SOTO, OSVALDO N
Address: GABLES INTERNATIONAL PLAZA, PH2C
City-St-Zip: CORAL GABLES, FL 33134

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: JOHN O SUTTON

MGRM

01/26/2009

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