

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000059517

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: AREVLIED INVESTMENTS, LLC

**Current Principal Place of Business:**

7955 N.W. 12 STREET, SUITE 400  
MIAMI, FL 33126

**New Principal Place of Business:**

1470 NW 107 AVENUE  
SUITE C  
MIAMI, FL 33172

**Current Mailing Address:**

7955 N.W. 12 STREET, SUITE 400  
MIAMI, FL 33126

**New Mailing Address:**

1470 NW 107 AVENUE  
SUITE C  
MIAMI, FL 33172

FEI Number: 26-0318520

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BATES, LISSETTE  
7955 N.W. 12 STREET, SUITE 400  
MIAMI, FL 33126 US

**Name and Address of New Registered Agent:**

BATES, LISSETTE  
1470 NW 107 AVENUE  
SUITE C  
MIAMI, FL 33172 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: LISSETTE BATES

04/25/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ACOSTA, ARENA  
Address: 7955 N.W. 12 STREET, SUITE 400  
City-St-Zip: MIAMI, FL 33126

Title: MGRM ( ) Delete  
Name: BATES, LISSETTE  
Address: 7955 N.W. 12 STREET, SUITE 400  
City-St-Zip: MIAMI, FL 33126

Title: MGRM ( ) Delete  
Name: PRADO, EDGAR  
Address: 7955 N.W. 12 STREET, SUITE 400  
City-St-Zip: MIAMI, FL 33126

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ACOSTA, ARENA  
Address: 1470 NW 107 AVENUE, SUITE C  
City-St-Zip: MIAMI, FL 33172

Title: MGRM (X) Change ( ) Addition  
Name: BATES, LISSETTE  
Address: 1470 NW 107 AVENUE, SUITE C  
City-St-Zip: MIAMI, FL 33172

Title: MGRM (X) Change ( ) Addition  
Name: PRADO, EDGAR  
Address: 1470 NW 107 AVENUE, SUITE C  
City-St-Zip: MIAMI, FL 33172

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: LISSETTE BATES

MGRM

04/25/2008

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