

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000071884

FILED
Apr 30, 2008
Secretary of State

Entity Name: THE MONTIEL ORGANIZATION, LLC

Current Principal Place of Business:

999 BRICKELL AVE
STE 555
MIAMI, FL 33131

New Principal Place of Business:

5757 BLUE LAGOON DR
SUITE #160
MIAMI, FL 33126

Current Mailing Address:

999 BRICKELL AVE
STE 555
MIAMI, FL 33131

New Mailing Address:

5757 BLUE LAGOON DR
STE 160
MIAMI, FL 33126

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTIEL, ORLANDO
999 BRICKELL AVE
STE 555
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

MONTIEL, ORLANDO
5757 BLUE LAGOON DR
STE 160
MIAMI, FL 33126 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: ORLANDO MONTIEL

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MONTIEL, ORLANDO
Address: 999 BRICKELL AVE
City-St-Zip: MIAMI, FL 33131

Title: MGRM () Delete
Name: MONTIEL, DENISE P
Address: 999 BRICKELL AVE
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MONTIEL, ORLANDO
Address: 5757 BLUE LAGOON DR
City-St-Zip: MIAMI, FL 33126

Title: MGRM (X) Change () Addition
Name: MONTIEL, DENISE P
Address: 5757 BLUE LAGOON DR
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: ORLANDO MONTIEL

MGR

04/30/2008

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