

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000074568

Entity Name: CX OPERATIONS, LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

8209 N.W. 74TH AVENUE
MEDLEY, FL 33166

New Principal Place of Business:

Current Mailing Address:

8209 N.W. 74TH AVENUE
MEDLEY, FL 33166

New Mailing Address:

FEI Number: 20-8481614

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHAEL I. BERNSTEIN, P.A.
1688 MERIDIAN AVENUE, STE 418
MIAMI BEACH, FL US

Name and Address of New Registered Agent:

SAMUEL, ROTTENBERG MARKOWI
3737 INDIAN CREEK DRIVE
604
MIAMI BEACH, FL 33140 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: SAMUEL ROTTENBERG

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WEILL, ARTHUR
Address: 8209 N.W. 74TH AVENUE
City-St-Zip: MEDLEY, FL 33166

Title: MGRM () Delete
Name: ROTTENBERG, SAMUEL
Address: 8209 N.W. 74TH AVENUE
City-St-Zip: MEDLEY, FL 33166

Title: MGRM () Delete
Name: STUHL, JACOB
Address: 8209 N.W. 74TH AVENUE
City-St-Zip: MEDLEY, FL 33166

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SAMUEL ROTTENBERG

MGRM

04/30/2009

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