

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000076994

FILED
Apr 22, 2009
Secretary of State

Entity Name: IB-LIEVE, LLC

Current Principal Place of Business:

5745 S.W. 57TH TERRACE
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

5745 S.W. 57TH TERRACE
MIAMI, FL 33143

New Mailing Address:

FEI Number: 26-0593084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DISCEPOLA, JOSEPH P
5745 S.W. 57TH TERRACE
MIAMI, FL 33143 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: DISCEPOLA, JOSEPH P
Address: 5745 S.W. 57TH TERRACE
City-St-Zip: MIAMI, FL 33143

Title: MGRM () Delete
Name: BICKART, KEVIN C
Address: 1 YARMOUTH PLACE
City-St-Zip: BOSTON, MA 02116

Title: MGRM () Delete
Name: RAJU, KANSAGRA
Address: 16 BRANDYWINE ROAD
City-St-Zip: WAYSIDE, NJ 07712

Title: MGRM () Delete
Name: LAMENDOLA, JOSEPH R
Address: 1 YARMOUTH PLACE
City-St-Zip: BOSTON, MA 02116

Title: MGRM () Delete
Name: KROLL, JONATHAN R
Address: 1 YARMOUTH PLACE
City-St-Zip: BOSTON, MA 02116

Title: MGRM () Delete
Name: VILLAPIANO, JOSEPH D
Address: 1 YARMOUTH PLACE
City-St-Zip: BOSTON, MA 02116

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:

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

Title: MGRM (X) Change () Addition
Name: KROLL, JONATHAN R
Address: 120 BOYLSTON STREET
City-St-Zip: BOSTON, MA 02116

Title: MGRM (X) Change () Addition
Name: MCCAFFREY, DANIEL E
Address: 72 PHILLIPS STREET, APT. 2
City-St-Zip: BOSTON, MA 02114

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: JOSEPH P. DISCEPOLA

MGRM

04/22/2009

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