

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000088232

Entity Name: S.O. 422 LLC

FILED  
Apr 07, 2011  
Secretary of State

**Current Principal Place of Business:**

C/O 1500 SAN REMO AVE, SUITE 248  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

2641 N. FLAMINGO ROAD  
#1505  
SUNRISE, FL 33323

**Current Mailing Address:**

C/O 1500 SAN REMO AVE, SUITE 248  
CORAL GABLES, FL 33146

**New Mailing Address:**

2641 N. FLAMINGO ROAD  
#1505  
SUNRISE, FL 33323

FEI Number: 90-0356244

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BARED, PABLO R ESQ  
BARED AND ASSOC., P.A.  
1500 SAN REMO AVENUE, SUITE 248  
CORAL GABLES, FL 33146 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: MGR  
Name: SALDARRIAGA, RAFAEL  
Address: 2641 N. FLAMINGO ROAD #1505  
City-St-Zip: SUNRISE, FL 33323

Title: MGR  
Name: SALDARRIAGA, JUAN DIEGO  
Address: 2641 N. FLAMINGO ROAD #1505  
City-St-Zip: SUNRISE, FL 33323

Title: MGR  
Name: SALDARRIAGA, SIMON  
Address: 2641 N. FLAMINGO ROAD #1505  
City-St-Zip: SUNRISE, FL 33323

I hereby 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: RAFAEL SALDARRIAGA

MGR

04/07/2011

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