


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 24, 2008 8:00 am**  
**Secretary of State**

01-24-2008 90071 010 \*\*\*143.75

<b>DOCUMENT # L07000088907</b> 1. Entity Name <b>THE SUTHERLAND GROUP, LLC</b>					
Principal Place of Business <b>15501 SW 79TH AVENUE MIAMI, FL 33157</b>			Mailing Address <b>13015 SW 89TH PLACE UNIT 127 MIAMI, FL 33176</b>		
2. Principal Place of Business - No P.O. Box # <b>15501 SW 79th Avenue</b> Suite, Apt. #, etc.		3. Mailing Address <b>13015 SW 89th Place</b> Suite, Apt. #, etc. <b>Unit 127</b>			
City & State <b>Miami, Florida</b> Zip <b>33157</b> Country <b>USA</b>		City & State <b>Miami, Florida</b> Zip <b>33176</b> Country <b>USA</b>			
6. Name and Address of Current Registered Agent  <b>VARGAS, ELIZABETH M 15501 SW 79TH AVENUE MIAMI, FL 33157</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
4. FEI Number <b>26-0780516</b> Applied For Not Applicable					
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$5.00 Additional Fee Required</b>					
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>Elizabeth M Vargas</i> DATE <b>1-16-2008</b> <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75</b>			<b>Make check payable to Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR VARGAS, ELIZABETH M 15501 SW 79TH AVENUE MIAMI, FL 33157</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Elizabeth M Vargas*