


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

6/2 **FILED**
Sep 10, 2008 8:00 am
Secretary of State

06-25-2008 90052 017 ***138.75

DOCUMENT # L07000109899					
1. Entity Name THE PROVIDENCE COMPANIES, LLC					
Principal Place of Business 1221 BRICKELL AVENUE, SUITE 929 MIAMI, FL 33131			Mailing Address 1221 BRICKELL AVENUE, SUITE 929 MIAMI, FL 33131		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SILVEIRA, VALERIE 121 CRANDON BLVD. #156 201 Crandon Blvd KEY BISCAVNE, FL 33149 #440				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGR	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	BUZANELI, ANTONIO		NAME		
STREET ADDRESS	310 REDWOOD LANE		STREET ADDRESS		
CITY-ST-ZIP	KEY BISCAVNE, FL 33149		CITY-ST-ZIP		
TITLE	MGR	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SILVEIRA, RICH		NAME		
STREET ADDRESS	121 CRANDON BLVD., #156		STREET ADDRESS		
CITY-ST-ZIP	KEY BISCAVNE, FL 33149		CITY-ST-ZIP		
TITLE	MGR	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SMITH, MICHAEL		NAME		
STREET ADDRESS	155 OCEAN LANE DR. #515		STREET ADDRESS		
CITY-ST-ZIP	KEY BISCAVNE, FL 33144		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS	1/2 3MND		STREET ADDRESS		
CITY-ST-ZIP	1/2 PRNP		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: <u>[Signature]</u>			Date: <u>6/23/08</u>		Debit Phone #: <u>206 5719621</u>

30011500



06182008 Chg-LLC CR2E083 (12/06)

4. FEI Number 26-1327171 Applied For Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

ATTACHMENT

30011265



September 5, 2008

Florida Department of State
Division of Corporations
PO Box 6478
Tallahassee, FL 32314

~~VIA OVERNIGHT COURIER~~ (PO Box) *ms*

Re: Document #:L07000109899

C: Rich Silveira

To Whom It May Concern,

Attached please find the form that was missing our FEIN. This form unfortunately was sent to our old address and we just received it. Please note that the address on the form is correct, however your letter was sent to a very old address in Ft. Lauderdale.

Please change our records to reflect the proper address so there is no delay in the future.

We would appreciate you forgoing the late fee since the letter was sent to the wrong address. We apologize for the inconvenience of the letter not being completed in the first place.

Respectfully,

A handwritten signature in black ink, appearing to read "Valerie Silveira", written in a cursive style.

Valerie Silveira
Corporate Controller

Global Headquarters
1221 Brickell Avenue, 9th Floor
Miami, Florida 33131

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786.513-2700 (Fax)
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