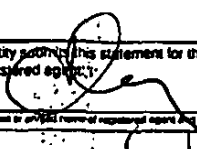


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 25, 2008 8:00 am
Secretary of State

04-24-2008 90032 001 ***832.50

DOCUMENT # L07000119475																												
1. Entity Name 2254 LLC																												
Principal Place of Business 201 S. BISCAYNE BLVD., STE. 2400 MIAMI, FL 33131		Mailing Address 201 S. BISCAYNE BLVD., STE. 2400 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	4. FEI Number 26-1571473																								
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				Applied For ☐ Not Applicable																								
6. Name and Address of Current Registered Agent OCARIZ, HUMBERTO H 201 S. BISCAYNE BLVD., STE. 2400 MIAMI, FL 33131				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City State 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 																												
FILE NOW! FEB 15 \$138.75 After May 1, 2008 Fee will be \$538.75																												
Make check payable to Florida Department of State																												
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2">9. MANAGING MEMBERS/MANAGERS</th> <th colspan="2">10. ADDITIONS/CHANGES</th> </tr> <tr> <td> TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Delete </td> <td> MGRM GERSTL, ALFREDO 201 S. BISCAYNE BLVD., STE. 2400 MIAMI, FL 33131 </td> <td> TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition </td> <td></td> </tr> <tr> <td> TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Delete </td> <td></td> <td> TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition </td> <td></td> </tr> <tr> <td> TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Delete </td> <td></td> <td> TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition </td> <td></td> </tr> <tr> <td> TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Delete </td> <td></td> <td> TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition </td> <td></td> </tr> <tr> <td> TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Delete </td> <td></td> <td> TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition </td> <td></td> </tr> </table>					9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES		TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Delete	MGRM GERSTL, ALFREDO 201 S. BISCAYNE BLVD., STE. 2400 MIAMI, FL 33131	TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ 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 606, Florida Statutes.																												
SIGNATURE: 