

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000124597

FILED
Apr 23, 2009
Secretary of State

Entity Name: ADIA SIGNATURE COLLECTION, LLC.

Current Principal Place of Business:

8501 SW 124 AVENUE
SUITE 315
MIAMI, FL 33183 US

New Principal Place of Business:

Current Mailing Address:

8501 SW 124TH AVENUE
SUITE 315
MIAMI, FL 33183 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIMENTEL, AIDA M
8501 SW 124TH AVENUE
SUITE 315
MIAMI, FL 33183 US

Name and Address of New Registered Agent:

NOYA, ORLANDO
8501 SW 124TH AVENUE
SUITE 315
MIAMI, FL 33183 US

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: ORLANDO NOYA

04/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PIMENTEL, AIDA M
Address: 8501 SW 124TH AVENUE, SUITE 315
City-St-Zip: MIAMI, FL 33183

Title: MGRM () Delete
Name: NOYA, ORLANDO
Address: 8501 SW 124TH AVENUE, SUITE 315
City-St-Zip: MIAMI, FL 33183

Title: MGRM () Delete
Name: PIMENTEL, ANA M
Address: 8501 SW 124TH AVENUE, SUITE 315
City-St-Zip: MIAMI, FL 33183

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:

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: ORLANDO NOYA

MGRM

04/23/2009

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