

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000024239

**FILED**  
**Jan 18, 2009**  
**Secretary of State**

**Entity Name:** STERLING PALM BEACH HOLDINGS MM, LLC

**Current Principal Place of Business:**

ONE NORTH CLEMATIS STREET  
STE 305  
W PALM BEACH, FL 33401

**New Principal Place of Business:**

340 ROYAL POINCIANA WAY  
SUITE 316  
PALM BEACH, FL 33480 US

**Current Mailing Address:**

ONE NORTH CLEMATIS STREET  
STE 305  
W PALM BEACH, FL 33401

**New Mailing Address:**

340 ROYAL POINCIANA WAY  
SUITE 316  
PALM BEACH, FL 33480 US

**FEI Number:** 26-2254235

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRAGG, K. LAWRENCE  
200 S BISCAYNE BLVD  
STE 4900  
MIAMI, FL 33131 US

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

KOSOY, BRIAN MGR  
340 ROYAL POINCIANA WAY  
SUITE 316  
PALM BEACH, FL 33480 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:** BRIAN KOSOY

01/18/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:**

**ADDITIONS/CHANGES:**

**Title:** MGR ( ) Change (X) Addition  
**Name:** KOSOY, BRIAN MGR  
**Address:** 340 ROYAL POINCIANA WAY SUITE 316  
**City-St-Zip:** PALM BEACH, FL 33480 US

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:** BRIAN KOSOY

MGR

01/18/2009

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