2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000028320

Entity Name: ALEX HOFRICHTER, LLC.

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

GABLES SQUARE-4TH FLOOR
75 VALENCIA AVE.
GABLES SQUARE- 4TH FLOOR
75 VALENCIA AVE.

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

GALBES SQUARE - 4TH FLOOR
75 VALENCIA AVE.
CORAL GABLES, FL 33134

GABLES SQUARE - 4TH FLOOR
75 VALENCIA AVE.
CORAL GABLES, FL 33134

CORAL GABLES, FL 33134

FEI Number: 26-2427379 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOFRICHTER, ALEX
2332 GALIANO STREET, STE. 136
CORAL GABLES, FL 33134 US
HOFRICHTER, ALEX
75 VALENCIA AVENUE
GABLES SQUARE - 4TH FLOOR
CORAL GABLES, FL 33134 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: 04/14/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: ALEX HOFRICHTER, PA
Address: GABLES SQUARE - 4TH FLOOR, 75 VALENCIA AVE
City-St-Zip: CORAL GABLES, FL 33134

Name: ALEX HOFRICHTER, PA
Address: 75 VALENCIA AVE, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

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: ALEX HOFRICHTER MGRM 04/14/2009