

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000029547

FILED  
Mar 21, 2009  
Secretary of State

Entity Name: GRIFFIN EVENT TRANSPORTATION LLC

**Current Principal Place of Business:**

1 LUDIAM DR  
MIAMI, FL 33166

**New Principal Place of Business:**

1 LUDLAM DR  
MIAMI, FL 33166

**Current Mailing Address:**

1 LUDIAM DR  
MIAMI, FL 33166

**New Mailing Address:**

1 LUDLAM DR  
MIAMI, FL 33166

FEI Number: 06-1838732

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FEIJOO, ANTONIO  
1 LUDIAM DR  
MIAMI, FL 33166 US

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

FEIJOO, ANTONIO  
1 LUDLAM DR  
MIAMI, FL 33166 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:

03/21/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FEIJOO, ANTONIO  
Address: 1 LUDIAM DR  
City-St-Zip: MIAMI, FL 33166

Title: MGRM ( ) Delete  
Name: REIJOO, KAYLA  
Address: 1 LUDIAM DR  
City-St-Zip: MIAMI, FL 33166

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: FEIJOO, ANTONIO  
Address: 1 LUDLAM DR  
City-St-Zip: MIAMI, FL 33166

Title: MGRM (X) Change ( ) Addition  
Name: FEIJOO, KAYLA  
Address: 1 LUDLAM DR  
City-St-Zip: MIAMI, FL 33166

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: ANTONIO FEIJOO

PRES

03/21/2009

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