

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000031308

Entity Name: DLM PARTNERSHIP LLC

FILED  
Feb 12, 2009  
Secretary of State

**Current Principal Place of Business:**

18901 N.E. 29 AVE.  
SUITE 101  
AVENTURA, FL 33160 US

**New Principal Place of Business:**

**Current Mailing Address:**

18901 N.E. 29 AVE.  
SUITE 101  
AVENTURA, FL 33160 US

**New Mailing Address:**

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

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

DADE COUNTY CORPORATE AGENTS, INC.  
18901 N.E. 29 AVE.  
SUITE 100  
AVENTURA, FL 33180 US

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

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SUTTIN, DORIS B  
Address: 18901 N.E. 29 AVE., #101  
City-St-Zip: AVENTURA, FL 33180 US

**ADDITIONS/CHANGES:**

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: DORIS SUTTIN

PART

02/12/2009

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