

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000057723

FILED
Aug 12, 2009
Secretary of State**Entity Name:** FLAGAMI PROPERTIES, LLC**Current Principal Place of Business:**15527 S.W. 18TH ST.
MIAMI, FL 33185**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 3706
CORAL GABLES, FL 33134**New Mailing Address:****FEI Number:** 26-2860018**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TORTOLERO, IVONNE
15527 S.W. 18TH ST.
MIAMI, FL 33185 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: VALOR, JOAQUIN
Address: P.O. BOX 3706
City-St-Zip: CORAL GABLES, FL 33134Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: MGR () Change (X) Addition
Name: TORTOLERO, IVONNE
Address: 15527 S W 18 STREET
City-St-Zip: MIAMI, FL 33185

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: JOAQUIN VALOR

MGR

08/12/2009

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