2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000066433

Entity Name: ADLER HELIOS B INVESTOR I, LLC

FILED Mar 07, 2011 Secretary of State

03/07/2011

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

1400 NW 107TH AVENUE 5TH FLOOR MIAMI, FL 33172

Current Mailing Address: New Mailing Address:

1400 NW 107TH AVENUE 5TH FLOOR MIAMI, FL 33172

FEI Number: 26-2994927 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:

ADLER, LINDA K ESQ.

C/O CFRA, LLC

4221 W. BOY SCOUT BLVD, SUITE 1000

TAMPA, FL 33607 US

SMITHER, ROBERT M
1400 NW 107TH AVENUE
5TH FL
MIAMI, FL 33172 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: ROBERT M. SMITHER

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM

Name: ADLER NEWCO GP 2, INC Address: 1400 NW 107 AVE 5TH FLOOR

City-St-Zip: MIAMI, FL 33172

Title: F

Name: ADLER, MICHEAL M

Address: 1400 NW 107 AVE 5TH FLOOR

City-St-Zip: MIAMI, FL 33172

Title: EVP

Name: ADLER, MATTHEW L

Address: 1400 NW 107 AVE 5TH FLOOR

City-St-Zip: MIAMI, FL 33172

Title: EVP

Name: HARRIS, BRETT W

Address: 1400 NW 107 AVE 5TH FLOOR

City-St-Zip: MIAMI, FL 33172

Title: VP/T

Name: SMITHER, ROBERT

Address: 1400 NW 107TH AVE 5TH FLOOR

City-St-Zip: MIAMI, FL 33172

Title:

Name: SMITHER, ROBERT M

Address: 1400 NW 107TH AVE 5TH FLOOR

City-St-Zip: MIAMI, FL 33172

I hereby 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 Statues.

SIGNATURE: ROBERT M. SMITHER VP/T 03/07/2011

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