

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000083219

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** LAW OFFICES OF SQUIRES BENSON, P.L.

**Current Principal Place of Business:**

301 ARTHUR GODFREY ROAD  
SUITE 502  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

**Current Mailing Address:**

301 ARTHUR GODFREY ROAD  
SUITE 502  
MIAMI BEACH, FL 33140

**New Mailing Address:**

**FEI Number:** 27-0968881

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SQUIRES, GILBERT K ESQ.  
301 ARTHUR GODFREY ROAD  
SUITE 502  
MIAMI BEACH, FL 33140 US

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

LAW OFFICES OF GILBERT K. SQUIRES, P.L.  
301 ARTHUR GODFREY ROAD  
SUITE 502  
MIAMI BEACH, FL 33140 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: MR. GILBERT K. SQUIRES P.E., ESQ.

04/27/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LAW OFFICES OF GILBERT K. SQUIRES, P.L.  
Address: 301 ARTHUR GODFREY ROAD, SUITE 502  
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGR  
Name: OFFICES OF OLIVIA S. BENSON, ESQ., P.A.  
Address: 3350 S.W. 148TH AVE., SUITE 110  
City-St-Zip: MIRAMAR, FL 33027

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 Statutes.

SIGNATURE: GILBERT K. SQUIRES, ESQ.

MGRM

04/27/2011

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