

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000093791

Entity Name: THE WAY HOLDING, LLC.

FILED
Jun 23, 2009
Secretary of State

Current Principal Place of Business:

175 FONTAINEBLEAU BLVD
2A5
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

175 FONTAINEBLEAU BLVD
2A5
MIAMI, FL 33172

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DIEPPA, EDUARDO E III
1881 WASHINGTON AVENUE 11H
MIAMI BEACH, FL 33139 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: TERAN, ENRIQUE J
Address: 175 FONTAINEBLEAU BLVD 2A5
City-St-Zip: MIAMI, FL 33172 US

Title: MGR () Delete
Name: TERAN, CECILIA
Address: 175 FONTAINEBLEAU BLVD 2A5
City-St-Zip: MIAMI, FL 33172 US

Title: MGR () Delete
Name: KORDA, ANDRES
Address: 175 FONTAINEBLEAU BLVD 2A5
City-St-Zip: MIAMI, FL 33172 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANDRES KORDA

MGR

06/23/2009

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