2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 02, 2009
Secretary of State

DOCUMENT# L08000096079

Entity Name: CAFIN PROPERTIES, LLC

Current Principal Place of Business:

9725 NW 52 STREET #517
DORAL, FL 33178

New Principal Place of Business:

Current Mailing Address:

9725 NW 52 STREET #517
DORAL, FL 33178

New Mailing Address:

FEI Number: 26-4833091 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

DE RIOS, MINA CAFARO
9725 NW 52 STREET #517
DORAL, FL 33178 US

Name and Address of New Registered Agent:

CAFARO, MARTHA I
9725 NW 52 STREET #517
DORAL, FL 33178 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: MARTHA I CAFARO 09/02/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: DE RIOS, MINA CAFARO
Address: 9725 NW 52 STREET #517
City-St-Zip: DORAL, FL 33178

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: DE RIOS, MINA CAFARO
Address: 9725 NW 52 STREET #517
City-St-Zip: DORAL, FL 33178

Title: MGR ( ) Change (X) Addition
Name: CAFARO, MARTHA I
Address: 9725 NW 52 STREET # 517
City-St-Zip: DORAL, FL 33178

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: MARTHA I CAFARO MGR 09/02/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date