

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000082417

FILED
Mar 14, 2011
Secretary of State

Entity Name: CASAMID, LLC

Current Principal Place of Business:

2900 SW 28TH TERRACE
2ND FLOOR
COCONUT GROVE, FL 33133

New Principal Place of Business:

2121 PONCE DE LEON BLVD.
SUITE 1050
CORAL GABLES, FL 33134

Current Mailing Address:

2900 SW 28TH TERRACE
2ND FLOOR
COCONUT GROVE, FL 33133

New Mailing Address:

19501 W COUNTRY DR.
APT 304
AVENTURA, FL 33180

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEAL S. LITMAN PA
2900 SW 28TH TERRACE
2ND FLOOR
COCONUT GROVE, FL 33133 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: DIR
Name: SOLA, CARLOS A
Address: 19380 COLLINS AVE UNIT 1414
City-St-Zip: SUNNY ISLES, FL 33160 EU

Title: DIR
Name: DEPAOLI, ANDREA M
Address: 19380 COLLINS AVE UNIT 1414
City-St-Zip: SUNNY ISLES, FL 33160 EU

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: CARLOS A. SOLA

MR

03/14/2011

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