

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000105573

**FILED**  
**Apr 16, 2010**  
**Secretary of State**

**Entity Name:** SOUTH AMERICAN FINANCIAL, LLC

**Current Principal Place of Business:**

4577 NOBB HILL RD  
STE 203  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

4577 NOBB HILL RD  
STE 203  
SUNRISE, FL 33351

**New Mailing Address:**

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

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

FOLLESE, DANIEL  
4577 NOBB HILL RD  
STE 206  
SUNRISE, FL 33351 US

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

FOLLESE, DANIEL  
4577 NOB HILL RD  
STE 206  
SUNRISE, FL 33351 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: DANIEL FOLLESE

04/16/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SOUTH AMERICAN FUND UAD 11/2/09  
Address: 4577 NOB HILL ROAD, # 203  
City-St-Zip: SUNRISE, FL 33351

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: DANIEL FOLLESE

MGRM

04/16/2010

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