

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000062777

Entity Name: MIAMI CFS, LLC

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

SUITE 501 1007 NORTH AMERICAN WAY  
PORT OF MIAMI, FL 33132

## **New Principal Place of Business:**

1007 NORTH AMERICAN WAY  
SUITE 501  
PORT OF MIAMI, FL 33132

## **Current Mailing Address:**

SUITE 501 1007 NORTH AMERICAN WAY  
PORT OF MIAMI, FL 33132

## **New Mailing Address:**

1007 NORTH AMERICAN WAY  
SUITE 501  
PORT OF MIAMI, FL 33132

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

ARMSTRONG, TIMOTHY J  
PENTHOUSE SUITE 2222 PONCE DE LEON BLVD  
CORAL GABLES, FL 33134 US

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

ARMSTRONG, TIMOTHY J  
108 CANNON COURT W.  
PONTE VEDRA BEACH, FL 32082 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:

04/11/2012

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: AROCHA, CHRISTOPHER C  
Address: 1007 NORTH AMERICAN WAY, SUITE 501  
City-St-Zip: PORT OF MIAMI, FL 33132

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: CHRISTOPHER C. AROCHA

MGR

04/11/2012

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