2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L98000001753

1. Entity Name
NORCLIFF LLC



Principal Place of Business

2333 BRICKELL AVENUE, SUITE D-1 MIAMI, FL 33129 Mailing Address

2333 BRICKELL AVENUE, SUITE D-1 MIAMI, FL 33129 FILED Apr 28, 2008 08:00 AN Secretary of State



04222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 65-0861971

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

DAVID, MARY ANN Y ESQ 2333 BRICKELL AVENUE, SUITE D-1 MIAMI, FL 33129

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8.	. 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. I am familiar with, and	accept
	the obligations of registered agent.	

(NOTE: Registered Agent alignature required when reinstating)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000927139 05/20/08-80095-005 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGRM ROSEN, CLIFFORD D 2333 BRICKELL AVENUE, SUITE D-1 MIAMI, FL 33129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Proceedings of the second of t
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with his filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 of the receiver statustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OF

CLIFFORD D. ROSEN

RE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

04.22.08

305.859.4900

Daytime Phone #