2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000007224

1. Entity Name

ARCH FINANCIAL GROUP, LLC



Principal Place of Business

7000 W. PALMETTO PARK ROAD, SUITE 502 BOCA RATON, FL 33433

Mailing Address

7000 W. PALMETTO PARK ROAD, SUITE 502 BOCA RATON, FL 33433

FILED May 09, 2008 08:00 AN Secretary of State



04222008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number
	65-0960779

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 little if applicable

RITTER, GREGORY J ESQ. 7000 W. PALMETTO PARK ROAD, SUITE 502 BOCA RATON, FL 33433

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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 signature required when reinstating)

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

06/04/08-80004-019 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGRM KING, TERRI 7000 W. PALMETTO PARK RD., STE. 502 BOCA RATON, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GALINSKY, EYAL 20749 WATERS EDGE CT. BOCA RATON, FL 33498
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	
TITLE NAME STREET ADORESS. CITY-ST-ZIP	

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I hereby certify that the information supplied with this filling 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME

AG MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #