2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000009288

1. Entity Name

IDEAL INDUSTRIAL PROPERTIES, L.L.C.

FILED
Jan 22, 2008 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

PMB #187, 2545 E. SUNRISE BLVD. FORT LAUDERDALE, FL 33304 PMB #187, 2545 E. SUNRISE BLVD. FORT LAUDERDALE, FL 33304



01182008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applie	d For
47-5341146		Not Ap	plicable
5. Certificate of Status Desired		O Addition	nal

6. Name and Address of Current Registered Agent

SEVERNS, GARY 2545 E. SUNRISE BLVD. #187 FORT LAUDERDALE, FL 33304

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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.				
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when renatating) DATE		
FILE After May	NOWIII FEE IS \$138.75 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGRM			
NAME	SEVERNS, GARY			
STREET ADDRESS	P.M.B. 187, 2545 E. SUNRISE BLVD.	•		
CITY-ST-ZIP	FT.LAUDERDALE, FL 33304			
TITLE				
NAME		U0AAAAA		
STREET ADDRESS		U00000789890 01/23/08-80012-002 138.75		
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CITY-ST-ZIP				
11. I hereby of indicated limited lia	certify that the information supplied with this filing does not q on this report is true and accurate and that my signature shi bility company or the receiver or trustee empowered to exec	ualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information all have the same legal effect as if made under oath; that I am a managing member or manager of the ute this report as required by Chapter 608, Florida Statutes.		

ED NAME OF EXAMING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

v Severns