

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M01000001337

Entity Name: CIG INTERNATIONAL, LLC

**FILED**  
**Apr 13, 2011**  
**Secretary of State**

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

%CAPITALSOURCE - CAROLYN SILVA  
4445 WILLARD AVE., 12TH FLOOR  
CHEVY CHASE, MD 20815 US

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

5404 WISCONSIN AVENUE  
2ND FLOOR  
CHEVY CHASE, MD 20815 US

## **Current Mailing Address:**

%CAPITALSOURCE - CAROLYN SILVA  
4445 WILLARD AVE., 12TH FLOOR  
CHEVY CHASE, MD 20815 US

## **New Mailing Address:**

5404 WISCONSIN AVENUE  
2ND FLOOR  
CHEVY CHASE, MD 20815 US

FEI Number: 52-2125607

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: CAPITALSOURCE FINANCE, LLC  
Address: 5404 WISCONSIN AVENUE  
City-St-Zip: CHEVY CHASE, MD 20815 US

Title: S  
Name: TURITZ, JOSEPH  
Address: 5404 WISCONSIN AVENUE  
City-St-Zip: CHEVY CHASE, MD 20815 US

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: JOSEPH TURITZ

S

04/13/2011

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