

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90045 041 \*\*\*138.75

**DOCUMENT # M06000004185**

1. Entity Name  
**GOLDEN SANDS HOLDCO, LLC**



Principal Place of Business  
**400 ARTHUR GODFREY ROAD  
MIAMI BEACH, FL 33140**

Mailing Address  
**400 ARTHUR GODFREY ROAD  
MIAMI BEACH, FL 33140**

**60030184**



**DO NOT WRITE IN THIS SPACE**

03122008No Chg-LLC

CR2E083 (12/07)

4. FEI Number  
**04-3746863**

Applied For  
Not Applied

5. Certificate of Status Desired ☐ **\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**REGISTERED AGENTS OF FLORIDA, LLC  
100 SOUTHEAST SECOND STREET, STE 2900  
MIAMI, FL 33131-2130**

**DO NOT WRITE  
IN THIS SPACE**

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 reinstating)

DATE \_\_\_\_\_

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

**9. MANAGING MEMBERS/MANAGERS**

|                |                         |
|----------------|-------------------------|
| TITLE          | MGRM                    |
| NAME           | WSG 34TH STREET, LLC    |
| STREET ADDRESS | 400 ARTHUR GODFREY ROAD |
| CITY-ST-ZIP    | MIAMI BEACH, FL 33140   |

|                |  |
|----------------|--|
| TITLE          |  |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |

|                |  |
|----------------|--|
| TITLE          |  |
| NAME           |  |
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|----------------|--|
| TITLE          |  |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |

**DO NOT WRITE  
IN THIS SPACE**

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

SIGNATURE: \_\_\_\_\_

4/24/08