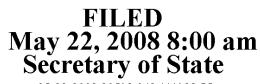
2008 LIMITED LIABILITY COMPANY ANNUAL REPORT



1. Entity Name RLJ II - R MIRAMAR, LLC	9 ***138.75
Principal Place of Business Mailing Address	
3 BETHESDA METRO CENTER, SUITE 1000 BETHESDA, MD 20814 3 BETHESDA METRO CENTER, SUITE 1000 BETHESDA, MD 20814	<u> </u>
2. Principal Place of Business - No P.O. Box # 3. Mailing Address	
Suite, Apt. #, etc. Suite, Apt. #, etc. 04222008 Chg-LLC CR2E083 (1:	·
City & State City & State 4. FEI Number 20-4855493	Applied For Not Applicable
Fee R	Additional equired
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name	
NRAI SERVICES, INC.	
2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331 Street Address (P.O. Box Number is Not Acceptable)	
City Fi Z	ip Code
FL	
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 familia the obligations of registered agent.	r with, and accept
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 Make check payable for ida Department of the check payable f	
9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES	
TITLE MGRM Delete TITLE DELETE	hange 🔲 Addition
STREET ADDRESS 3 BETHESDA METRO CENTER, SUITE 1000 STREET ADDRESS CITY-ST-ZIP BETHESDA, MD 20814 CITY-ST-ZIP	
	hange Addition
STREET ADDRESS STREET ADDRESS	
CITY-S1-ZIP	Change
NAME NAME	. –
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	
TITLE Delete TITLE SAME	Change
STREET ADDRESS STREET ADDRESS	
CITY-S1-ZIP	Change Addition
NAME NAME	
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	
1	
IIILE Delete IIILE DAME	Change
THLE	Thange Addition

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 the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.