

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000003274

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Entity Name:** RINCON CAPITAL PARTNERS, LLC

**Current Principal Place of Business:**

2525 PONCE DE LEON, SUITE 1250  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2525 PONCE DE LEON, SUITE 1250  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 26-0266591

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RINCON, JOHN BORIS  
2525 PONCE DE LEON  
SUITE 1250  
CORAL GABLES, FL 33134 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:** MGRM  
**Name:** RINCON, JUAN ALBERTO  
**Address:** 2525 PONCE DE LEON, SUITE 1250  
**City-St-Zip:** CORAL GABLES,, FL 33134

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:** JUAN ALBERTO RINCON

MGR

04/08/2011

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