

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 28, 2009  
Secretary of State**

DOCUMENT# M07000007063

Entity Name: TOWER 3315, LLC

**Current Principal Place of Business:**

C/O CMC GROUP, INC.  
701 BRICKELL AVE., SUITE 3150  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CMC GROUP, INC.  
701 BRICKELL AVE., SUITE 3150  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 20-5899796      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CAPITOL CORPORATE SERVICES, INC.  
155 OFFICE PLAZA DRIVE, SUITE A  
TALLAHASSEE, FL 32301 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 ( ) Delete  
Name: MIAMI SAXONY RESIDENTIAL, LLC  
Address: 701 BRICKELL AVE., #3150  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: MIAMI SAXONY RESIDENTIAL LLC

MGRM

04/28/2009

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