2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000001959

Entity Name: SAHTOOMA, LLC

FILED May 01, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5400 BROKEN SOUND BLVD NW #100 BOCA RATON, FL 33487

Current Mailing Address: New Mailing Address:

161 N. CLARK STREET
#100
CHICAGO, IL 60601

161 N. CLARK STREET
STE. 2600
CHICAGO, IL 60601

161 N. CLARK STREET
CHICAGO, IL 60601

FEI Number: 36-4331562 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

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: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 LEVITETZ, JEFFREY A
 Name:

 Address:
 5400 BROKEN SOUND BLVD., N.W. #100
 Address:

 City-St-Zip:
 BOCA RATON, FL 33487
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 RICCIARDI, SALVATORE
 Name:

 Address:
 5400 BROKEN SOUND BLVD., N.W. #100
 Address:

 City-St-Zip:
 BOCA RATON, FL 33487
 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: JEFFREY A. LEVITETZ MGRM 05/01/2007