

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Oct 09, 2009  
Secretary of State**

DOCUMENT# L02000003805

Entity Name: PURISSIMO, LLC

**Current Principal Place of Business:**

3123 NW 73 ST  
C  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

3123 NW 73 ST  
C  
MIAMI, FL 33147

**New Mailing Address:**

FEI Number: 04-3613495      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SAFFON, GERMAN CEO  
3123 NW 73 ST  
C  
MIAMI, FL 33147 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: MGR ( ) Delete  
Name: SAFFON, GERMAN  
Address: 3123 NW 73 ST STE C  
City-St-Zip: MIAMI, FL 33147

Title: MGR ( ) Delete  
Name: LONDONO, JULIAN  
Address: 3123 NW 73 ST STE C  
City-St-Zip: MIAMI, FL 33147

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

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

Title: MGR ( ) Change (X) Addition  
Name: LONDONO, ALEJANDRO  
Address: 3123 NW 73 ST STE C  
City-St-Zip: MIAMI, FL 33147

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: JULIAN LONDONO

MGR

10/09/2009

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