

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000031135

FILED
Apr 19, 2011
Secretary of State

Entity Name: STORSAFE HAMMOCKS MANAGER LLC

Current Principal Place of Business:

444 BRICKELL AVENUE, STE. 900
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

444 BRICKELL AVENUE, STE. 900
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-4553277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DE OLAZARRA, ALLEN C
Address: 444 BRICKELL AVENUE, SUITE 900
City-St-Zip: MIAMI, FL 33131

Title: MGRM
Name: SOCOLSKY, SERGIO
Address: 444 BRICKELL AVENUE, STE 900
City-St-Zip: MIAMI, FL 33131

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: ALLEN C. DE OLAZARRA

MGRM

04/19/2011

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