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SECRETARY OF STATE
TALLAHASSEE FLORIDA
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2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000029795

1. Entity Name
RAY KINSER WALLPAPER SPECIALIST, LLC

Principal Place of Business	Mailing Address
13111 165TH ROAD NORTH JUPITER, FL 33478 US	13111 165TH ROAD NORTH JUPITER, FL 33478 US

2. Principal Place of Business	3. Mailing Address
13111 165th Rd N	Same
Suite, Apt. #, etc.: Jupiter	Suite, Apt. #, etc.: Same
City & State: Florida	City & State: Same
Zip: 33478 Country: Palm Beach	Zip: Same Country: Same

03012005 Chg-LLC CR2E083 (10/03)

4. FEI Number ☐ Applied For ☑ Not Applicable

5. Certificate of Status Desired ☑ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
KINSER, ADRIAN R SR
13111 165TH ROAD NORTH
JUPITER, FL 33478

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Adrian Ray Kinser — DATE: 3-28-05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE	NAME / STREET ADDRESS / CITY-ST-ZIP	
MGRM	Adrian Ray Kinser 13111 165th Rd No. Jupiter, FL 33478	☐ Delete
		☐ Delete
		☐ Delete
		☐ Delete
		☐ Delete
		☐ Delete

10. ADDITIONS/CHANGES

TITLE	NAME / STREET ADDRESS / CITY-ST-ZIP		
		☐ Change	☐ Addition
		☐ Change	☐ Addition
		☐ Change	☐ Addition
		☐ Change	☐ Addition
		☐ Change	☐ Addition
		☐ Change	☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Adrian Ray Kinser Adrian Ray Kinser 561-746-2759
SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date 3-7-05 — Daytime Phone #