# LIMITED LIABILITY COMPANY
# UNIFORM BUSINESS REPORT (UBR)

**FILED**
**May 01, 2002 8:00 am**
**Secretary of State**
05-01-2002 91553 030 ****50.00

DOCUMENT # L98000002686

1. Entity Name
TRIPLE A-069 INVESTMENTS, L.C.

949272

DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 7350 Talona Drive | 7350 Talona Drive |
| Suite, Apt. #, etc. Suite A | Suite, Apt. #, etc. Suite A |
| City & State West Melbourne, Florida | City & State West Melbourne, Florida |
| Zip 32904 Country USA | Zip 32904 Country USA |

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0964920 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

DO NOT WRITE IN THIS SPACE

**7. Name and Address of Current Registered Agent**

Name: David W. Armstrong

Street Address (P.O. Box Number is Not Acceptable): 7350 Talona Drive, Suite A

West Melbourne, Florida 32904

City: West Melbourne FL Zip Code: 32904

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.

SIGNATURE: David W. Armstrong — April 22, 2002 (DATE)
Signature, typed or printed name of registered agent and title if applicable.

**FEE IS $50.00**
**Make Check Payable to Department of State**
**DUE BY MAY 1**

**9. MANAGING MEMBERS / MANAGERS**

| | |
|---|---|
| TITLE | Manager |
| NAME | David W. Armstrong |
| STREET ADDRESS | 7350 Talona Drive, Suite A |
| CITY-ST-ZIP | West Melbourne, Florida 32904 |

DO NOT WRITE IN THIS SPACE

CR2E083B (12/01)

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:** David W. Armstrong — April 22, 2002 — (321) 724-6674

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

David W. Armstrong