Amended

2001 UNIFORM BUSINESS REPORT (UBR)

1 of 2

DOCUMENT # L99000001257

1. Entity Name

Asset Management Advisors, LLC

FILED

01 AUG 23 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
1001 N. US Hwy 1 Suite 800 Jupiter, FL 33477	1001 N. US Hwy 1 Suite 800 Jupiter, FL 33477

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0915669 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Jonathan Carroll 1001 N. US Hwy 1, Suite 800 Jupiter, FL 33477	Name: Kevin Lakin Street Address (P.O. Box Number is Not Acceptable): 1001 N. US Hwy 1 Suite 800 City: Jupiter **FL** Zip Code: 33477

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: Kevin Lakin — 7/13/01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VST JONATHAN CARROLL 1001 N. US 1, Suite 800 Jupiter, FL 33477	☒ Delete	VST Kevin R. Lakin 1001 N. US 1, Suite 800 Jupiter, FL 33477	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	V Andrew S. Nachalko 1001 N. US 1, Suite 800 Jupiter, FL 33477	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	200004571262--5 -09/05/01--01075--035 *****61.50 *****61.50	☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition

CR2E083 (11/00)

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: Kevin Lakin — 7/13/01 — (561) 746-8444

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

2g2

Memorandum

To: Florida Dept Of State

CC:

From: Michael Low

Date: 8/20/2001

Re: Please Accept Check (ref#L99000002257)

To whom it may concern;

After discussing this situation with a representative from your office, he advised me to write a memo for your office to accept this check of $61.50.

Please accept this check in the amount of $61.50. Your memo states that the filing fee is $50.

Please accept this overpayment as payment for our filing fee.

Thank you.

Michael S. Low
Asset Management Advisors, LLC.
1001 N US HWY 1 Suite 800
Jupiter FL 33477
561-745-5075