2000 UNIFORM BUSINESS REPORT (UBR) FILED Jan 26, 2000 8:00 am Secretary of State **DOCUMENT # 852379** 1. Entity Name ZELL ONE INC. 01-26-2000 90097 005 ***150.00 Principal Place of Business Mailing Address 9400 S DADELAND BLVD. PHI 9400 S DADELAND BLVD. PH1 MIAMI FL 33156-9817 MIAMI FL 33156-2844 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 13-3108294 Not Additio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7 Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 City Zip Code FL 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. is the state on. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. 1 After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. SD ☐ Change Addition ☐ Delete TITLE FERNANDEZ, SERGIO R. NAME STREET ADDRESS STREET ADDRESS 9400 S DADELAND BLD PH1 CITY-ST-ZIP CITY-ST-7IP MIAMI FL Change Addition ☐ Delete TITLE TITLE CANNON, MICHAEL Y. NAME NAME STREET ADDRESS STREET ADDRESS 9400 S DADELAND BLV PH1 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ___: ☐ Change Addition TITLE **VPD** ☐ Delete TITLE NAME BERKOWITZ, PAUL NAME STREET ADDRESS STREET ADDRESS 1221 BRICKELL AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME WIENER, WILLIAM NAME STREET ADDRESS STREET ADDRESS 9400 S DADELAND BLVD PH1 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change Addition ☐ Delete TITLE WIENER, WILLIAM **TMAM** STREET ADDRESS 9400 S DADELAND BLVD PH1 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MIAMI FL ☐ Delete Change Addition TITLE J BOYNE %P BERKOWITZ STREET ADDRESS 1221 BRICKELL AVE STREET ADDRESS CITY-ST-ZIP MIAMI FL

13. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAELAYATCANNON SERESURED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR