FILED **2002 UNIFORM BUSINESS REPORT (UBR)** Jul 22, 2002 8:00 am Secretary of State DOCUMENT # L01000016274 CLOISTERS PARTNERS, L.L.C. 05-08-2002 90142 040 ****50 00 Principal Place of Business Mailing Address 2601 SOUTH BAYSHORE DRIVE. SUITE 300D 2601 SOUTH BAYSHORE DRIVE, SUITE 300D 29107 MIAMI FL 33133 MIAMI FL 33133 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name REGISTERED AGENTS OF FLORIDA, LLC 100 SOUTHEAST 2ND STREET, SUITE 3500 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33131 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By September 25, 2002 9. MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. President TITLE ☐ Delete TITLE Addition Change Lambert, Paul NAME NAME 1135 Adams Street CR2E083 STREET ADDRESS STREET ADDRESS follywood, FL 33019 CITY-ST-ZIP CITY-ST-ZIP Vice President TITLE ☐ Delete ☐ Change TITLE LIPF. Eric 12498 N. Bayshore Dr. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE D'Delete TITLÉ ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ 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 empewered to execute this report as required by Chapter 608, Florida Statutes.

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

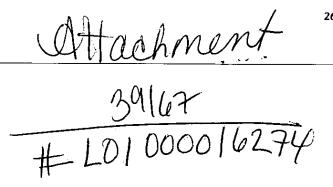
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #



2601 South Bayshore Drive, Suite 300 D Miami, Florida 33133 USA

> ph 305 860 3715 fx 305 860 3777



July 16, 2002

To whom it may concern,

Per my conversation with your office today, I was notified that our Uniform Business Report has not been filed due to lack of information. I was also informed that our report had been sent back to us for updating but I have no record of receiving it.

Enclosed please find a new report which includes the FEI number. The check that we originally submitted (Check#1953- dated 4/22/02) has already been cashed. I hope that this will be all the information necessary to proceed with the filing of our report.

If any other information is needed, please contact me at (305) 860-3715.

Thank you for your understanding.

Paul Lambert

Cloisters Partners, LLC