2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# L02000014647

Entity Name: 3215, L.L.C.

Current Principal Place of Business:

3215 GULF SHORE BLVD. N.
STE 507
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

592 DEER RIDGE LANE S.
MAPLEWOOD, FL 55119

New Mailing Address:

592 DEER RIDGE LANE S.
MAPLEWOOD, MN 55119

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KANE, THOMAS P
3215 GULF SHORE BLVD. N.
STE 507
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete
Name: KANE, THOMAS P
Address: 592 DEER RIDGE LANE S
City-St-Zip: MAPLEWOOD, MN 55119

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR ( ) Change (X) Addition
Name: KANE, KAREN R
Address: 592 DEER RIDGE LANE SOUTH
City-St-Zip: MAPLEWOOD, MN 55119

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: THOMAS P. KANE P 04/22/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date