SIGNATURE: EUROPA DIRECTORS LIMITED

that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000167960

Entity Name: 40 40 ISLAND ESTATES LLC

Current Principal Place of Business:

WATERGARDENS 6 24 GIBRALTAR, GX11-1AA

Current Mailing Address:

WATERGARDENS 6 24 GIBRALTAR, GX11-1AA AF

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

DADE COUNTY CORPORATE AGENTS, INC. 20295 NE 29 PLACE 200 AVENTURA, FL 33180 US

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

Authorized Person(s) Detail :			
Title	MGR	Title	MGR
Name	EUROPA DIRECTORS LIMITED	Name	EUROPA NOMINEES (GIBRALTAR) LIMITED
24	24	Address	WATERGARDENS 6 24
	GIBRALTAR GX11-1AA	City-State-Zip:	GIBRALTAR GX11-1AA

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and

FILED Apr 23, 2015 Secretary of State CC5182070844

Certificate of Status Desired: No

04/23/2015

Date

MGR