FILED

02 APR 26 AM 11:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000003209

1. Entity Name

EDGAR ENTERPRISES, L.L.C.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
428 VILLA NUEVA CIR.
Suite, Apt. #, etc.
City & State: NORTH PORT FL
Zip: 34287 Country: USA

3. Mailing Address
SAME
Suite, Apt. #, etc.
City & State: SAME
Zip: SAME Country: SAME

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0993233 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Spiegel & Utrera, P.A.
Street Address (P.O. Box Number is Not Acceptable): 1840 Southwest 22 Street
4th Floor
City: Miami FL Zip Code: 33145

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 By: Spiegel & Utrera, P.A.
Signature, typed or printed name of individual with authority to sign
Natalia Utrera, Vice President
DATE: 4/24/02

FEE IS $50.00
Make Check Payable to Department of State
DUE BY MAY 1

400005432234--8
-05/03/02--01012--018
*****50.00 *****50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	Hall, Colin
STREET ADDRESS	428 Villa Nueva Circle
CITY-ST-ZIP	North Port, Florida 34287

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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: Colin Hall Colin Hall April 22/02

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

Page 1 of 2