2001 UNIFORM BUSINESS REPORT (UBR)					FILED				
DOCUMENT # L0000003559  1. Entity Name PEDEN ENTERTAINMENT, LLC					Apr 14, 2001 08:00 AM Secretary of State				
Principal Place 7681 N.W. 14 ST PEMBROKE PII 33024	REET	Mailing Address 7681 N.W. 14 STREET PEMBROKE PINES 33024	FL						
2. Principal Place of Business       3. Mailing Address         11215 s.w. 125 PLACE       11215 s.w. 125 PLACE         Suite, Apt. #, etc.       Suite, Apt. #, etc.					-				
City & State		Suite, Apt. #, etc.  City & State			FEI Number	DO NOT WRI	E IN THIS	·	plied For
Zip 33186	Country	MIAMI Zip 33186	Country	_	5-0999573 Certificate of St	***		\$5.00 Add	
55100	6. Name and Address of Curro		•	7.	Name and Add	ress of New F			<u>-</u>
PEDEN GAITHER DIII 7681 N.W. 14 STREET  PEMBROKE PINES FL				Name PEDEN GAITHER DIII  Street Address (P.O. Box Number is Not Acceptable) 11215 S.W. 125 PLACE					
33024			City				FL	Zip Code	<del></del>
0 The element	named entity submits this statemer		MIAM					33186	
SIGNATURE _	Signature, typed or printed name of registered a	The second secon	Registered Agent sign OW!!! FEE IS yable to Depar	\$50.00	- 1		04/14 DATE	/2001	
9.	MANAGING ME	MBERS/MEMBERS	10.			ADDITIONS	/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY- ST-ZIP	MGRM GAITHER 11215 S.W. MIAMI	PEDEN 125 PLACE	DШ	-	Change	X Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	_			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	8				☐ Change	Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	6				☐ Change	Addition.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET ADDRESS GITY-ST-ZIP	S				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	6				☐ Change	Addition
indicated	pertify that the information supplied on this report is true and accurate bility company or the receiver or tru	and that my signature shall have t istee empowered to execute this r	the same legal ef report as required	fert as if made.	under oath: that	ilam a mana	I further cer ging membe	tify that the li er or manage	nformation or of the
SIGNAT	VIVE:	EN III ME OF SIGNING MANAGING MEMBER, MAN				J/14/2001 Date	C	Daytime Phone #	<u> </u>

CR2E083 (11/00)