*AMENDED *

LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L 00000004906 02 APR 25 AM 9:00 1. Entity Name SECRETARY OF STATE . 1721 Associates, L.L.C. TALL'AHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3361 S.W. 3rd Avenue 3. Mailing Address 3361 S.W. 3rd Avenue Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Miami, FL City & State Miami, FL Applied For 4. FEI Number 59-1401652 Not Applicable Country Zip Country \$5.00 Additional 33145 5. Certificate of Status Desired **USA** 33145 USA Fee Required 7. Name and Address of Current Registered Agent Ivor J. Bamberger DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 3361 S.W. 3rd Avenue ^{City}Miami ²33145 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 Signature, typed or printed name of registered agent and tit 000005430590

MANAGING MEMBERS/MANAGERS 9. MGR TITLE Beber, Silverstein & Partners Advertising, Inc. NAME 3361 S.W. 3rd Avenue STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Miami, FL 33145 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS STREET ACCRES DOINOT WRITE CITY-ST-ZIP CITY ST-ZIP TITLE mre" IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS

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 eath; 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. E. SILVERSTEIN SIGNATURE 4110102 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS

900200 00001/50100745

CITY-ST-ZIP

Daytime Phone #

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APPRUYO AND