

**09-1-23**

1. Entity Name  
**DWAIN BRANNON GROUP, L.L.C.**

**FILED**  
**Jan 22, 2001 8:00 A.M.**  
**Secretary of State**

Mailing Address  
1025 GREENWOOD BLVD.  
SUITE 121  
LAKE MARY FL 32746-5406

### 3. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Country

Not Applicable
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☐ **\$5.00** Additional  
Fee Required

7. Name and Address of New Registered Agent

Name \_\_\_\_\_

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**

10. ADDITIONS/CHANGES

☐ Delete

 Delete

 Delete

 Delete

☐ Delete☐ Delete

TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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☐ Change☐ Addition☐ Channel☐ Addition

**Change**

### Addition

☐ Change

☐ Addition

☐ Change☐ Addition☐ Change

 Addition

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

Date \_\_\_\_\_

Daytime Phone # \_\_\_\_\_

CR2E083 (11/00)