2002 UNIFORM BUSINESS REPORT (UBR)

Jan 23, 2002 8:00 am Secretary of State DOCUMENT # L0000007866 1. Entity Name 01-23-2002 90084 016 ****50.00 HICKORY ROAD NORTH HOLDINGS, L.L.C. Principal Place of Business Mailing Address 7311 S.W. 62ND AVENUE C/O RICHARD FEDER S. MIAMI FL 33143 7311 S.W. 62ND AVENUE S. MIAMI FL 33143 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FELNumber City & State City & State Applied For Not Applicable Zip Zip Country Country \$5.00 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RICHARD J. ALAN CAHAN, ESQ. Street Address (P.O. Box Number is Not Acceptable) C/O BECKER & POLIAKOFF, P.A. 5201 BLUE LAGOON DRIVE, SUITE 100 MIAMI FL 33126-2065 City 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. MGR ☐ Addition ☐ Delete TITLE Change FEDER, RICHARD NAME STREET ADDRESS STREET ADDRESS 7311 S.W. 62ND AVENUE CITY-ST-ZIP CITY-ST-ZIP S. MIAMI FL 33143 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete NAME

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 rify 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 contracted in the properties of the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted in the limited liability company or the receiver contracted liability contracted

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME ING MANAGING MEMBER

FILED