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

FILED Apr 30, 2002 8:00 am Secretary of State

DOCL 1. Entity Na	JMENT# L OOOOC	0010704	04-30-2002 90033 002 ****50.00				
TW EN PROVENCE, LCC							
	DO NOT WRITE	IN THIS S	PACE				
2. Principal Place of Business 3. Mailing Address 3. Y30 Enterprise Circle 3. Y30 Enterprise Circle							
Suite, Apt. #, etc. Suite, Apt. #, etc.			aprior circo		WRITE IN THIS SPACE	Ę	
City & Sta	ite	City & State	<u> </u>	4. FEI Number Applied For		Applied For	
Zip	Adenton KC Country	Bradento	Country	5 Cartificate of Status David	t c o	Not Applicable O Additional	
349	oa USA	34202	USA	Certificate of Status Desi Name and Address of Cu	Fee R	equired	
	DO NOT W		Name PE	SHKIN, JOH			
Street Address (F				S (P.O. Box Number is Not Accep	C). Box Number is Not Acceptable)		
IN THIS STACE.				217E 100	_ •		
u.,				identon	1 - 3	Code 54202	
8. The above	e named entity submits this statement for	the purpose of changing its	registered office or regist	tered agent, or both, in the State	of Florida.		
SIGNATURE	Signature, typed or printed name of registered agent an	nd title if applicable.		· · · · · · · · · · · · · · · · · · ·	DATE		
			EE IS \$50.00		79 to 10 to		
			yable to Department. UE BY MAY 1	of State			
9.	MANAGING MEMBER	S/MANAGERS		· · · · · · · · · · · · · · · · · · ·			
TITLE NAME	BESHKIN! 10HM MUNUGER	P. .	TITLE NAME			(12/01	
STREET ADDRESS CITY-ST-ZIP	BRADENTON, FC		STREET ADDRESS CITY-ST-ZIP			338 (
TITLE	MEMBER		TITLE			CR2E083B	
NAME STREET ADDRESS	TAYLOR WOODROWS 8482 Enterprise Ci BRADE NTON FL 34	STREET ADDRESS			ဝ		
CITY-ST-ZIP	BRADE NTON FL 34	1905					
TITLE NAME			TITLE NAME				
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	DO NOT	WRITE	,	
TITLE			TITLE		SPACE		
NAME STREET ADDRESS			Name Street address	*** 11110	OIAUL		
CITY-ST-ZIP			CITY-ST-ZIP		-		
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TITLE NAME			TITLE				
STREET ADDRESS			NAME STREET ADDRESS		•		
11. I hereby o	certify that the information supplied with the	nis filing does not qualify for	CITY-ST-ZIP	ection 110 07/2)/0 Florida Comme	on I further as a second	the information	
	By: TAYLOR Wood	at my signature snail have tr empowered to execute this re	ne same legal effect as if i eport as required by Char	made under oath; that I am a ma Ster 608: Florida Statutes	es. I further certify that t inaging member or mar	ne information nager of the	
SIGNATURE: ALEXANDER BLATT UP SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Dayling Proces							