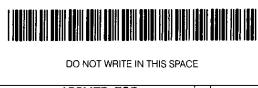
2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # L00000014701 1. Entity Name 🗽 PALM BEACH CORPORATE INVESTMENTS, LLC Principal Place of Business Mailing Address 712 U.S. HIGHWAY ONE. STE. 400 712 U.S. HIGHWAY ONE. STE. 400 NORTH PALM BEACH FL 33408 NORTH PALM BEACH FL 33408

FILED Aug 19, 2002 8:00 am Secretary of State

08-19-2002 90136 041 ****50.00

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2. Principal Place of Business 3. Mailing Address							-					
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State				City & State			4. FEII	4. FEI Number APPLIED FOR			Applied For	
Zip	p Country Zip			o	Cour	ntry		5. Certificate of Status Desired S5.00 Additional				
6. Name and Address of Current Registered Agent							7 Nam	7. Name and Address of New Registered Agent				
	O. IVallie	BIIG Address of Cu	i i ci ii i i i cgi sic	rea Agent		Name	7. IVali	ie and Address of New Negls	tered Agent			
SNOW, CORTLANDT 5600 N FLAGLER DR UNIT 504 WEST PALM BEACH FL 33407							ss (P.O. Box f	(P.O. Box Number is Not Acceptable)				
						City FL Zip C					e l	
the obligat	e named entit tions of regist		ent for the pui	pose of changing its	s register	ed office or regi	stered agent,	or both, in the State of Fiorida	I am familiar	with, a	and accept	
SIGNATURE	Signature, typed	or printed name of registered	agent and title if a	pplicable. (NO	E: Registere	d Agent signature rec	hijved when reinsta	iting)	DATE			
Make Check					ayable t	FEE IS \$50.0 o Department mber 25, 200	A of State					
9. MANAGING MEMBERS/MANAGERS						10. ADDITIONS			S/CHANGES			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Peter M Bridge RD. Le ny 11801		. 🔲 Delete	TITL NAM SIB CITY	I			☐ Ct	ange	☐ Addition	
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indicated	l on this repor		and that my	signature shall have	the same	e legal effect as	if made unde	.07(3)(i), Florida Statutes. I furth or oath; that I am a managing r orida Statutes.				

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