2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # L00000014998 1. Entity Name SUMMIT INVESTMENT GROUP, LLC FILED 01 APR:-2 AM 1:47 Principal Place of Business Mailing Address SECRETARY OF STATE. TALLAHASSEE, FLORIDA 2. Principal Place of Business 3. Mailing Address 633 South Federal Highway P.O. Box 02-9010 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 8th Floor City & State City & State 4. FEI Number X Applied For Fort Lauderdale, Florida Fort Lauderdale, Florida Not Applicable Country Country \$5.00 Additional 33301 5. Certificate of Status Desired 33302-9010 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MATTEL, HARVEY Street Address (P.O. Box Number is Not Acceptable) 633 SOUTH FEDERAL HIGHWAY, 8TH FLOOR FORT LAUDERDALE, FLORIDA 33301 City Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) CONTRACTOR SERVICES **600003992596--**-04/11/01--01097--010 FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State ~\*\*\*\*\*50.00 \*\*\*\*\*50.00 s MANAGING MEMBERS/MEMBERS 9. 10. ADDITIONS/CHANGES TITLE Delete TITLE Managing Member ☐ Change X Addition NAME NAME Mattel, Harvey STREET ADDRESS STREET ADDRESS 633 S. Federal Highway, 8th Floor CITY-ST-ZIP CITY-ST-ZIP Fort Lauderdale, FL 33301 TITLE ☐ Delete TITLE ☐ Change Managing Member X Addition NAME NAME Karas, George STREET ADDRESS STREET ADDRESS 2121Sutter Street, 3rd Floor CITY-ST-ZIP CITY-ST-ZIP San Francisco, CA 94108 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 reflective that the minimization supplies with this limit does not quality of the exemption stated in document 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 of this ee empowered to execute this report as required by Chapter 608, Florida Statutes. Harvey Mattel SIGNATURE: 3/29/01 Managing Member (954)763~5095

RINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE AND TYPED