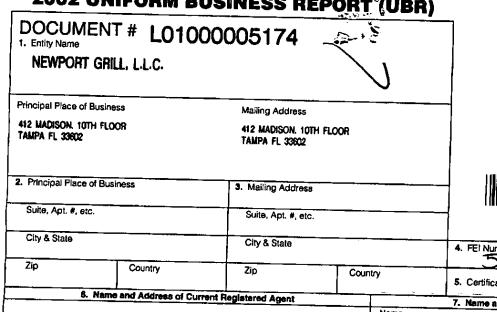
2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jun 05, 2002 8:00 am Secretary of State

05-13-2002 90204 050 ****50.00



DO NOT WRITE IN THIS SPACE 4. FEI Numbe Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name DOLAN, MARK R Street Address (P.O. Box Number is Not Acceptable) 412 MADISON, 10TH FLOOR TAMPA FL 33602 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 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 Due By May 1, 2002 9. MANAGING MEMBERS/MANAGERS 10 ADDITIONS/CHANGES TITLE ☐ Delete TITLE managing member NAME Change Addition CR2E083 (9/01) NAME Tungleroom Investments, Inc. STREET ADDRESS STREET ADDRESS 412 É. Madison St. Svite 1000 CITY-ST-ZIP CITY-ST-ZIP 1ampa PL 33602 ☐ Celete TITLE ☐ Change NAME ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE NAME ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIE ☐ Delete TITLE NAME ☐ Change □ Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change NAME ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS 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 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 G MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE:

Daylime Phone 6