2002 UNIFORM BUSINESS REPORT (UBR)

Mar 28, 2002 8:00 am³ Secretary of State DOCUMENT # L0100005700 03-28-2002 90125 001 ****50.00 MARLIN BISSO MANAGEMENT COMPANY, LLC Principal Place of Business Mailing Address 1318 ALFORD AVE. 1318 ALFORD AVE. SUITE 202 SUITE 202 BIRMINGHAM AL 35226 BIRMINGHAM AL 35226 2. Principal Place of Business 3. Mailing Address P.O. Box 660571 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State Birmingham, Alabama 58-2617801 Not Applicable Zip Country \$5.00 Additional 5. Certificate of Status Desired 35266 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RUNNELS, DAVAGE J III Street Address (P.O. Box Number is Not Acceptable) 36468 EMERALD COAST PKWY SUITE: 21017 **DESTIN FL 32541** City Zip Code ptity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. March 8, 2002 SIGNATURE (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 MGR TITI F ☐ Change ☐ Addition TITLE ☐ Delete BISSO, RICHARD L NAME NAME STREET ADDRESS 1318 ALFORD AVE. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **BIRMINGHAM AL 35226** Change ☐ Addition Delete TITLE TITLE 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-7IP ☐ Addition TITLE Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change D Delete TITLE NAME 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 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.

limited liability company or the rec

205-822-3982 March 8, 2002 MANAGER OR AUTHORIZED REPRESENTATIVE

FILED