FILED 2002 UNIFORM BUSINESS REPORT (UBR), May 15, 2002 8:00 am § Secretary of State DOCUMENT # L0100007487 1. Entity Name 05-15-2002 90135 003 ****50.00 PREMIERE CATERING, LLC Principal Place of Business Mailing Address 1418 37TH STREET COURT WEST 1418 37TH STREET COURT WEST **BRADENTON FL 34205 BRADENTON FL 34205** 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. FEI Number Applied For 75 2993849 Not Applicable Zip Country Zin Country Fee Required \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KIBBY, LINDA J Street Address (P.O. Box Number is Not Acceptable) 1418 37TH STREET COURT WEST **BRADENTON FL 34205** 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** (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 ADDITIONS/CHANGES 10. TITLE MGR ☐ Delete TITLE ☐ Addition NAME KIBBY, WAYNE A NAME STREET ADDRESS STREET ADDRESS 1418 37TH STREET COURT WEST CITY-ST-7IP CITY-ST-ZIP BRADENTON FL 34205 TITLE MGR ☐ Delete MGR TITLE Change ☐ Addition RANTZ, MARK NAME RANTZ, MARK NAME 3003 BAYSHORE GARDENS PKWY STREET ADDRESS 6977 MADONNA PLACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Bradenton, FL 34207 SARASOTA FL 34243 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 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 PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE