| IF CHURA LAGIER   |   |   | 10165   |  |  | May 24<br>Secre<br>04-16-20               | 002 90084 038 *  | ****50.00                    |
|---|---|---|---|--|--|---|--|------------------------------|
|   | ioadway partne  | 2HS, LLC  |   |  |  |   |  |                              |
| Principal Place   | of Business   |   | Mailing Address   | 7  |  |   |  |                              |
| 1619 BROADWA  | AY  |   | 1619 BROADWAY   |  |  | ~ ~                                       | ~ ~ <u>~ ~</u>   | 00000                        |
| RIVIERA BEACH   | 1 FL 33404  |   | Riviera Beach FL 33   | 3404   | •  |   |  |                              |
| 2. Principal Place of Business<br>Suite, Apt. #, etc.<br>City & State   |   | 3. Mailing Address                                |   |  |  |   |  |                              |
|   |   |   | Suite, Apt. #, etc.<br>City & State   |  |  | DO NOT WRITE IN THIS SPACE  4. FEL Number |  |                              |
|   |   |   |   |  |  |   |  |                              |
| Zip   | Country   |   | Zip   | Country  |  | 5-0136453                                 |  | Not Applicable<br>Additional |
|   | 6. Name and Address   | s of Current Re                                   | glatered Agent  |  |  | ne and Address of New F                   | Fee Req  | benlu                        |
|   |   | · • • • • • • • •                                 |   | Narr   | 10   |   |  |                              |
| SMITH, LAWRENCE M<br>1619 BROADWAY<br>RIVIERA BEACH FL 33404  |   |   | Street Address  |  | et Address (P.O. Box)  | (P.O. Box Number is Not Acceptable)       |  |                              |
| HIVE  |   |   |   |  |  |   |  | 1                            |
| HIVIE   |   |   |   | L City   |  |   |  |                              |
| The above na<br>GNATURE   |   |   | File Applicable (K<br>File<br>Make Check  | NOTE Registered Agent is<br>NOW!!! FEE IS<br>Payable to Depa   | preture required when reinstat<br>3 \$50.00<br>Britment of State                   | or both, in the State of Fic              | FL Zip C<br>xida.<br>DATE  | ode                          |
| The above na  | arned entity submits this<br>greature, typed or printed name of a                                     | epistered epent and                               | rije i applicable. (N<br>FILE<br>Make Check   | NOTE Registered office<br>NOTE Registered Agencies<br>NOW!!! FEE IS<br>Payable to Depa<br>Due By May 1, 2  | preture required when reinstat<br>3 \$50.00<br>Britment of State                   | sing)                                     | CATE   | cde                          |
| GNATURE S   | arned entity submits this<br>greature, typed or printed meme of a<br>MANAGI<br>PLES (DEN T            | NG MEMBERS  | File # applicable. (N<br>FILE<br>Make Check  <br>C<br>/MANAGERS   | NOTE: Registered Agences<br>NOTE: Registered Agences<br>NOW!!! FEE IS<br>Payable to Depa   | preture required when reinstat<br>3 \$50.00<br>Britment of State                   |   | CATE   |                              |
| IGNATURE SI   | med entity submits this<br>greature, typed or printed meme of r<br>MANAGI<br>PLES I DEN T<br>AW RENCE | NG MEMBERS  | Managers  | NOTE: Registered office<br>NOTE: Registered Agencies<br>NOW!!! FEE IS<br>Payable to Depa<br>Due By May 1, 2<br>10.<br>TILE<br>NAME   | gneture required when related<br>\$ \$50.00<br>artment of State<br>002             | sing)                                     | AND CATE   | Addition                     |
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| The above na<br>GNATURE   | MANAGI<br>DLES I DENT<br>AWLETICE<br>I G BLOADWA<br>CICE PLES I DE<br>HOMAS A. MA<br>619 BLOADWA      | NG MEMBERS<br>M. SMIT<br>J. FL<br>NT<br>ANT<br>AV | He F applicable (N<br>FILE<br>Make Check I<br>D<br>/MANAGERS<br>Deleta<br>33404<br>Deleta   | NOTE: Registered Agence<br>NOTE: Registered Agence<br>NOW!!! FEE IS<br>Payable to Dep<br>Due By May 1, 2<br>10.<br>TILE<br>NAME<br>STREET ADDRES<br>CITY-ST-ZIP  | gnature required when reinstate<br>\$ \$50.00<br>artiment of State<br>002          | sing)                                     | ZATE<br>CHANGES  | Addition                     |
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