FILED **2002 UNIFORM BUSINESS REPORT (UBR)** May 01, 2002 8:00 am § Secretary of State DOCUMENT # L01000015560 05-01-2002 91481 035 ****50.00 THE OWENS GROUP ENTERPRISES, LLC Principal Place of Business Mailing Address 3832-010 PMB 370 3832-010 PMB 370 BAYMEADOWS ROAD BAYMEADOWS ROAD JAX FL 32217 JAX FL 32217 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3496493 City & State City & State Applied For Not Applicable Country Zip Country Zip \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name OWENS, GREGORY Street Address (P.O. Box Number is Not Acceptable) 4873 JAYBIRD CIRCLE NORTH JACKSONVILLE FL"32257 Zip Code City 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State ţ., Due By May 1, 2002 ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 9. 10. PITIMOMP ☐ Change ☐ Addition TITLE ☐ Delete TITLE Gregory owens NAME NAME 4873 Laybird Circle N STREET ADDRESS STREET ADDRESS Jacksonville FL 32257 CITY-ST-ZIP CITY-ST-ZIP VP/SIMBR ☐ Change **Addition** ☐ Delete TITLE TITLE Janet G. cwens NAME NAME 4873 Jaybird Circle N STREET ADDRESS STREET ADDRESS Jacksonville, FL 32257 CITY-ST-7IP CITY-ST-ZIP Garrett J. Owens /MGR ☐ Change Addition ☐ Delete TITLE TITLE 4873 Jay bird Circle N NAME STREET ADDRESS STREET ADDRESS Tacksonville FL 32257 CITY-ST-ZIP CITY-ST-ZIP MGR X Addition ☐ Change ☐ Delete TITLE TITLE Morgon 2. Owens NAME NAME 4873 bushind Circle N STREET ADDRESS STREET ADDRESS Jacksonville FL 3225) CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME es allached STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE

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:

SIGNATURE and Types on Printed Name on Signing Managing Member, Manager, on Authorized Representative

Date Daytime Phone

Hachment # LD1000015560

Enterprises, LLC 94925

The Owens Group Enterprises, LLC

Gregory Owens (MGMR/MGR/T) 4873 Jaybird Circle N Jacksonville, Florida 32257

Janet G. Owens (MGMR/S) 4873 Jaybird Circle N Jacksonville, Florida 32257

Garrett G. Owens (MGMR) 4873 Jaybird Circle N Jacksonville, Florida 32257

Morgan E. Owens (MGMR) 4873 Jaybird Circle N Jacksonville, Florida 32257

Revised April 20, 2002