FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 22, 2002 8:00 am Secretary of State DOCUMENT # L01000015563 04-22-2002 90225 015 ****50.00 SILICON BEACH, L.L.C. Principal Place of Business Mailing Address 6420 SOUTHPOINT PARKWAY 6420 SOUTHPOINT PARKWAY JACKSONVILLE FL 32216 JACKSONVILLE FL 32216 2. Principal Place of Business 312 East Mill Chase Court 3. Mailing Address 312 Fast Mill Chese Court Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Ponte Vedra Bouc orle Vedra 4. FEI Number Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HENRY, BARRY K 6420 SOUTHPOINT PARKWAY JACKSONVILLE FL 32216 ^෭ප්^ද්ස්ර්පිය 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. Nanager SIGNATURE Signature, typed or printed t signature required when reinstating) 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 Murager Member ☐ Delete TITLE Addition CR2E083 (9/01 Change Jose S. Lantique 1831 Wild Grape Lane NAME NAME Jose S. Lantiqua STREET ADDRESS STREET ADDRESS 1831 Wild Grape Lane CITY-ST-ZIP 320*0*3 CITY-ST-ZIP Orange Park, + <u> 2</u>003 TITLE ☐ Delete TITLE Change 4 Addition NAME NAME Thomas H. Reinheimer 3)2 East MillChese Sourt STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Vedra Bauch 3*2*082 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition 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 Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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

4 /15/02

904-281-4-239