LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 15, 2005 8:00 am
Secretary of State
07-15-2005 90065 029 ****50.00

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DOCUMENT # L01000018121

1. Entity Name
OCEAN DRIVE ACCESSORIES, LLC

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
992 WEST 15TH STREET	
Suite, Apt. #, etc	Suite, Apt. #, etc.
City & State: RIVIERA BEACH, FL	City & State
Zip: 33404 / Country	Zip / Country

4. FEI Number: 03-0413716 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: LEE D. GOLDSTEIN
Street Address (P.O. Box Number is Not Acceptable): 3120 SOUTH OCEAN BLDV
City: PALM BEACH FL Zip Code: 33480

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] MANAGER 7/7/2005
Signature, typed or printed name of registered agent and title if applicable. DATE

FEE IS $50.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE	MANAGER	TITLE	
NAME	LEE D. GOLDSTEIN	NAME	
STREET ADDRESS	3120 SOUTH OCEAN BLVD	STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH, FL 33480	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	

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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] MANAGER 7/7/2005 561.840.4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #