2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State
05-02-2003 90580 004 ****50.00

DOCUMENT # L02000001136

1. Entity Name
NETWATCH, LLC

Principal Place of Business	Mailing Address
2730 WESTGATE AVE WEST PALM BEACH, FL 33409	2730 WESTGATE AVE WEST PALM BEACH, FL 33409

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business: 12153 Persimmon Blvd	3. Mailing Address: P.O. Box 212036
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Royal Plm. Bch. FL	City & State: Royal Plm. Bch., FL
Zip: 33411 Country	Zip: 33421 Country

4. FEI Number: 04-3590840 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LEITTEN, SCOTT J 1001 N US HWY ONE SUITE 400 JUPITER, FL 33477	Name: Joe E. Medina Street Address (P.O. Box Number is Not Acceptable): 12153 Persimmon Blvd. City: Royal Palm Beach FL Zip Code: 33411

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: Jose E. Medina DATE: 4/29/03

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 Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MEDINA, JOE E 2730 WESTGATE AVE WEST PALM BEACH, FL 33409	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E083 (10/02)

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: Jose E. Medina — 4/29/03 — 561-792-2304

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #