FILED

2003 LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

Apr 18, 2003 8:00 am Secretary of State DOCUMENT # L02000003433 04-18-2003 90077 039 ****50.00 SUR INVESTMENTS, L.L.C. Principal Place of Business Mailing Address 3440 HOLLYWOOD BLVD., STE 360 3440 HOLLYWOOD BLVD., STE 360 HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 04-36071 P Not Applicable Zip Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROTH, LEONARDO A ESQ. Street Address (P.O. Box Number is Not Acceptable) 3440 HOLLYWOOD BLVD., STE 360 HOLLYWOOD FL 33021 City Zip Code 8. The above named 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 eaistered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES **MGRM** TITLE TITLE Change ☐ Addition ☐ Delete NAME **EPSTEIN. GREGORIO** NAME STREET ADDRESS STREET ADDRESS 3440 HOLLYWOOD BLVD., STE 360 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 TITLE MGRM ☐ Delete TITLE ☐ Change Addition NAME EPSTEIN, DARIO G NAME STREET ADDRESS STREET ADDRESS 3440 HOLLYWOOD BLVD., STE 360 CITY-ST-ZIP CITY-ST-ZIP. HOLLYWOOD FL 33021 ---TITLE MGRM ☐ Delete TITLE ☐ Change ■ Addition NAME GOTTSELIG, YANINA L NAME STREET ADDRESS 3440 HOLLYWOOD BLVD., STE 360 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 Delete □ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the infor upplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME

indicated on this report is the

limited liability company or the

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

stee empowered to execute this report as required by Chapter 608, Florida Statutes.