# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-03-2003 90011 050 ****50.00

DOCUMENT # L02000003501

1. Entity Name
WELLINGTON COMMONS, LLC

| Principal Place of Business | Mailing Address |
|---|---|
| 12555 ORANGE DRIVE<br>DAVIE FL 33330<br>US | 12555 ORANGE DRIVE<br>DAVIE FL 33330<br>US |

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

☑ CHECK HERE IF MAKING CHANGES

4. FEI Number 03-0445307 — 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 |
|---|---|
| LEOPOLD, KORN & LEOPOLD, P.A.<br>20801 BISCAYNE BOULEVARD<br>SUITE 501<br>AVENTURA FL 33180 | Name: ZIMMERMAN, HOWARD J<br>Street Address (P.O. Box Number is Not Acceptable): 12555 ORANGE DRIVE STE 100<br>City: DAVIE FL Zip Code: 33330 |

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: HOWARD J. ZIMMERMAN - MGR — DATE: 3/14/03

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 | MGR ☐ Delete | TITLE | MGR- PARTNER ☐ Change ☑ Addition |
| NAME | ZIMMERMAN, HOWARD J | NAME | MARSHALL A. WEINBERG TRUST |
| STREET ADDRESS | 12555 ORANGE DRIVE | STREET ADDRESS | 8061 BERMUDA POINT |
| CITY-ST-ZIP | DAVIE FL 33330 | CITY-ST-ZIP | DAVIE, FL 33328 |
| TITLE | ☐ Delete | TITLE | MGR- PARTNER ☐ Change ☑ Addition |
| NAME | | NAME | L. MICHAEL ORLOVE |
| STREET ADDRESS | | STREET ADDRESS | 2600 ISLAND BLVD. PH #2 |
| CITY-ST-ZIP | | CITY-ST-ZIP | AVENTURA, FL 33160 |
| TITLE | ☐ Delete | TITLE | ☐ Change ☐ Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | ☐ Delete | TITLE | ☐ Change ☐ Addition |
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| CITY-ST-ZIP | | CITY-ST-ZIP | |
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| TITLE | ☐ Delete | TITLE | ☐ Change ☐ Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |

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: HOWARD J. ZIMMERMAN - MGR — SIGNATURE REQUIRED — Date: 3/14/2003 — Daytime Phone #: (954) 862-1440

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE