**FILED** 

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

## Apr 16, 2003 8:00 am Secretary of State DOCUMENT # L0200007195 04-16-2003 90032 012 \*\*\*\*50.00 1. Entity Name RJG INVESTMENTS, LLC Principal Place of Business Mailing Address 3440 HOLLYWOOD BLVD., SUITE 360 3440 HOLLYWOOD BLVD., SUITE 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 City & State Applied For 4. FEI Number Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ROUSSO, MARK E ESQ. Street Address (P.O. Box Number is Not Acceptable) 3440 HOLLYWOOD BLVD., SUITE 360 HOLLYWOOD FL 33021 City Zip Code 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, 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 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. MGR TITLE ☐ Delete TITLE Change Addition NAME ROUSSO, MARK NAME STREET ADDRESS STREET ADDRESS 3440 HOLLYWOOD BLVD., SUITE 360 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 TITLE MGR ☐ Delete TITLE ☐ Change ☐ Addition NAME JAURE, JACINTO NAME STREET ADDRESS STREET ADDRESS 3440 HOLLYWOOD BLVD., SUITE 360 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ 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 ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

SIGNATURE:

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

CITY-ST-ZIP

CITY-ST-ZIP