## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L02000009390

1. Entity Name

1424 WASHINGTON STREET, LLC



## FILED Jun 04, 2004 8:00 am Secretary of State 06-04-2004 90272 013 \*\*\*\*50.00

of Business ON STREET 3040 ace of Business  , etc.	Mailing Address 2903 HARRIS AVENUE KEY WEST FL 33040  3. Mailing Address Suite, Apt. #, etc.		)   					
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	City & State	· · · · · · · · · · · · · · · · · · ·		FEI Number 86-1011563		<u>`</u>	Applied For Not Applicable	
Country	Zip	Country	5. Certificat	5. Certificate of Status Desired   \$5.00 Additional Fee Required				
	nt Registered Agent	Niewe		d Address of New R	egistered /	Agent		
LEAR, ELIZABETH 2903 HARRIS AVENUE KEY WEST FL 33040				per is Not Acceptable	9)			
# **		City		·		Zip Cod	e	
						• '		
named entity submits this statement ons of registered agent	for the purpose of changing i	ts registered office or re	gistered agent, or b	oth, in the State of Flo	orida. 1 am 1	familiar with,	and accept	
Signature, typed or printed name of registered agr	ent and title if applicable. (NC	TE: Registered Agent signature r	equired when reinstating)		DATE	•	<del></del> -	
?	Make Check Paya	ble to Florida Depar	rtment of State	,				
			103	100/2010				
				ADDITIONS,	/CHANGES		Addition	
NAME MATTHEWS, ROBERT STREET ADDRESS 331. MADISON AVENUE, 8TH FLOOR S					, '	Change	Addition	
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	MANAGING MEM MGR MATTHEWS, ROBERT 331 MADISON AVENUE, 8TH NEW YORK NY 10017	MANAGING MEMBERS / MANAGERS  MATTHEWS, ROBERT  331 MADISON AVENUE, 8TH FLOOR  NEW YORK NY 10017    Delete   Delete	RELIZABETH HARRIS AVENUE WEST FL 33040  City  city  mamed entity submits this statement for the purpose of changing its registered office or registered agent.  Signature, typed or printed name of registered agent and title if epplicable.  (NOTE: Registered Agent aignature r  FILE NOW!!! FEE IS \$50  Make Check Payable to Florida Depain Due By September 24, 20  MANAGING MEMBERS/MANAGERS  10.  MATTHEWS, ROBERT  331 MADISON AVENUE, 8TH FLOOR NEW YORK NY 10017  Delete  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete STREET ADDRESS CITY-ST-ZIP  Delete STREET ADDRESS CITY-ST-ZIP  Delete STREET ADDRESS CITY-ST-ZIP  Delete	6. Name and Address of Current Registered Agent  7. Name an  Name  Name  Name  Street Address (P.O. Box Numb  WEST FL 33040  City  City  named entity submits this statement for the purpose of changing its registered office or registered agent, or bush of registered agent, and stell if applicable.  FILE NOW!!! FEE IS \$50.00  Make Check Payable to Florida Department of State  Due By September 24, 2003  MANAGING MEMBERS/MANAGERS  MGR  MATTHEWS, ROBERT  331 MADISON AVENUE, 8TH FLOOR  NEW YORK NY 10017  Delete  TILE  NAME  STREET ADDRESS  CITY-ST-ZIP  Delete  STREET ADDRESS  CITY-ST-ZIP	6. Name and Address of Current Registered Agent 7. Name and Address of New R RELIZABETH HARRIS AVENUE WEST FL 33040  City  FILE NOW!!! FEE IS \$50.00  Make Check Payable to Florida Department of State Due By September 24, 2003  MANAGING MEMBERS/MANAGERS  MARRIBUSON AVENUE, 8TH FLOOR  NEW YORK NY 10017  Delete  TITLE NAME STREET ADDRESS CITY-51-2P  Delete TITLE NAME STREET ADDRESS CITY-51-2P  Delete TITLE NAME STREET ADDRESS CITY-51-2P  TITLE NAME STREET ADDRESS CITY-51-2P  Delete TITLE NAME STREET ADDRESS CITY-51-2P  Delete TITLE NAME STREET ADDRESS CITY-51-2P  TITLE NAME STREET ADDRESS CITY-51-2P  Delete TITLE NAME STREET ADDRESS CITY-51-2P  TITLE NAME STREET ADDRESS CITY-51-2P  TITLE NAME STREET ADDRESS CITY-51-2P  Delete TITLE NAME STREET ADDRESS CITY-51-2P  Delete STREET ADDRESS CITY-51-2P  TITLE NAME STREET ADDRESS CITY-51-2P  Delete STREET ADDRESS CITY-51-2P  STREET ADDRESS CITY-51-2P  Delete STREET ADDRESS CITY-51-2P  STREET ADDRESS CITY-51-2P	Street Address of New Registered.  LELZABETH HARRIS AVENUE WEST FL 33040  City  FL  ammed entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am one of registered agent.  Signature, types or printed name of registered agent and ster it applicable.  NOTE. Registered Agent algorities when reinstating)  DATE  FILE NOW!!! FEE IS \$50.00  Make Check Payable to Florida Department of State Due By September 24, 2003  MANAGING MEMBERS/MANAGERS  10. ADDITIONS/CHANGES MATHEWS, ROBERT 331 MADISON AVENUE, 8TH FLOOR NEW YORK NY 10017  Delete  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  Delete STREET ADDRESS CITY-ST-ZIP  STREET ADD	Street Andress of Name and Address of New Registered Agent    ELIZABETH	

Thereby certify that the information supplied with this mining does not quality for the exemption stated in Section 119.07(3)(1), Florida Statutes. 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. 212

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

2935100

Daytime Phone #