


# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
Feb 26, 2003 8:00 am  
Secretary of State

02-26-2003 90029 006 \*\*\*\*50.00

**DOCUMENT # L02000009637**

1. Entity Name  
**PLEXUS DALLAS, LLC**



Principal Place of Business      Mailing Address

**848 BRICKELL AVENUE, SUITE 600  
MIAMI FL 33131**      **848 BRICKELL AVENUE, SUITE 600  
MIAMI FL 33131**

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      Applied For

**04-3648091**      Not Applicable

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

6. Name and Address of Current Registered Agent

**HASNER, MARK M  
ONE S.E. 3RD AVENUE, SUITE 2400  
MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name      **Ivan L. H. Martell**

Street Address (P.O. Box Number is Not Acceptable)      **Plexus Dallas, LLC**

**848 Brickell Avenue, Suite 600**

City      **Miami**      State      **FL**      Zip Code      **33131**

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      **Ivan L. H. Martell, Manager**      *Ivan L. H. Martell*      DATE      **1-20-03**

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
MGR	Ivan L. H. Martell	848 Brickell Ave, Suite 600	Miami, FL 33131	<input type="checkbox"/>	<input checked="" type="checkbox"/>
MGR	Kyle H. Martell	848 Brickell Ave, Suite 600	Miami, FL 33131	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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      *Ivan L. H. Martell*      **EVAN L. H. MARTELL**      DATE      **1-20-03**      Daytime Phone #      **305-377-2880**

Signature and typed or printed name of signing managing member, manager, or authorized representative

CR2E083 (10/02)