2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

May 05, 2005 8:00 am Secretary of State **DOCUMENT # L02000021651** 05-05-2005 90023 032 ****50.00 1. Entity Name IT'S A TWIN THING, LLC Principal Place of Business Mailing Address Trentary 1055 CLEAR CREEK CIRCLE 2201 SPRINGWOOD LN CLERMONT, FL 34711 BURLINGTON, WI 53105 2. Principal Place of Business 3. Mailing Address 1210 Robinhood Suite, Apt. #, etc. 04142005 Chg-LLC CR2E083 (10/03) City & State ▲ FFI Number Applied For City & State aterford 54-2070719 Not Applicable Zip Country \$5.00 Additional 5. Certificate of Status Desired 3185 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Management CLASSIC MANAGEMENT & TRAVEL INC. Street Address (P.O. Box Number is Not Acceptable) 1239 HIGHWAY 27 SOUTH CLERMONT, FL 34-7111 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 ISGOT GHOL SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Filing Fee is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State ADDITIONS/CHANGES 9: MANAGING MEMBERS/MANAGERS 10. MGRM MGRM TITLE ☐ Delete TITLE Change ☐ Addition DAMASCHKE, RONALD NAME NAME JOSE PH DOMANIK 1410 ROBINHOOD DRIVE WATER FORD, WI 53185 2201 SPRINGWOOD LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BURLINGTON, WI 53105** CITY-ST-ZIP TITLE MGR ☐ Delete TITLE MGR MARTHA DOMANIK DAMASCHKE, MARCELLA NAME 1210 ROBINHOOD BRIVE 2201 SPRINGWOOD LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BURLINGTON, WI 53105 CITY-ST-ZIP water FORD. 53185 MGR Ronald Damaschke MGR ☐ Delete TITLE MAAS, MARTHA NAME NAME 2201 Spring wood lane STREET ADDRESS 1210 ROBINHOOD DRIVE STREET ADDRESS Buelington, WI 53185 WATERFORD, WI 53185 CITY-ST-ZIP CITY-ST-ZIP marcella Damaschke MGR TITLE ☐ Delete ΠDF Addition DOMANIK, JOSEPH NAME 2201 Spengwood Lane 1210 ROBINHOOD DRIVE STREET ADDRESS STREET ADDRESS 61 53185 WATERFORD, WI 53185 CITY-ST-ZIP CITY-ST-ZIP Buelington. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP TITS 6 Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP 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.

NATURE AND TYPED OF PRINTED NAME OF SKINING MANAGING MEMBER, MANAGER, OR AUTHORITED REPRESENTATIVE

15/05