2008 LIMITED LIABILITY COMPANY

FILED Jan 31, 2008 08:00 AN Secretary of State DOCUMENT # L02000026823 1. Entity Name ALLA ONE, LLC Principal Place of Business Malling Address 1901 NE 197 TERRACE 1901 NE 197 TERRACE MIAMI, FL 33179 MIAMI, FL 33179 01142008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 14-1855046 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent KLISTON, TODD W DO NOT WRITE 8211 W. BROWARD BLVD., STE. 375 PLANTATION, FL 33324 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) FILE NOWILL FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. TITLE LITVINOV, BORIS NAME STREET ADDRESS 1901 NE 197TH TERR MIAMI, FL 33179 CITY-ST-ZIP TITLE KOSAYA, ALLA NAME STREET ADDRESS 1901 NE 197TH TERR MIAMI, FL 33179 CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TIT) F IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE

11. I hereby certify that the information supplied with this ill g does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the ered to execute this report as required by Chapter 608, Florida Statutes. indicated on this report is true and accurate and limited liability company or the receiver or trustee

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

RINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE