2003 LIMITED LIABILITY COMPANY

Apr 28, 2003 8:00 am Secretary of State

04-15-2003 90026 010 ****55.00

UNIFORM BUSINESS REPORT (UBR

DOCUMENT # L02000026961 1. Entity Name CRYSTAL HOLDINGS, LLC Malling Address Principal Place of Business 7027 WEST BROWARD BLVD., SUITE 2103 7027 WEST BROWARD BLVD., SUITE 2103 FORT LAUDERDALE FL 33317 FORT LAUDERDALE FL 33317 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 13-1934076 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPCO, INC. Street Address (P.O. Box Number is Not Acceptable) 2699 SOUTH BAYSHORE DRIVE, 7TH FLOOR MIAMI FL 33133 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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. 10. MGR CR2E083 (10/02) TITLE Detete TITLE Addition CHISHOLM REALTY COMPANY, LTD. NAME MAME STREET ADDRESS STREET ADDRESS 7027 WEST BROWARD BLVD., SUITE 2103 CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33317 TITLE □ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Detete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-7IP ☐ Detete ☐ Addition TITLE TITLE ☐ Channe NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP 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 eath; 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. TURE AND TYPED OR