AMENDED 2003 LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

FILE D SECRETARY OF STLO2000028429 DIVISION OF CORPORATIONS 09-23-2003 90024 017 ****50.00 DOCUMENT # L02000028429 1. Entity Name REBTEX INVESTMENTS, LLC 03 SEP 25 AM 11: 02 1-19/29 Principal Place of Business Mailing Address 3801 PGA BLVD. 3801 PGA BLVD. SUITE 803 SUITE 803 PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 51-2386594 Not Applicable Zip Country Country Zio \$5.00 Additional 5. Certificate of Status Desired П Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BUESINGER, RONALD E JR. Street Address (P.O. Box Number is Not Acceptable) 208 MAINSAIL CIRCLE Jupiter FL 33477 8260 Native Dancer Rd E. City Palm-Beach Consters 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 GBITE: Registered Agent signature required when reinstating) Kuesinger FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By September 24, 2003 MANAGING MEMBERS/MANAGERS (4/03) TITLE Delete TITLE Change NAME NAME STREET ADDRESS CR2E083 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TTLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP Deteta TITLE TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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.

04-30-2003 90174 040 ****50.00