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

SIGNATURE:

Mar 11, 2003 8:00 am Secretary of State **DOCUMENT # L02000032092** 02-25-2003 90086 008 ****50.00 1. Entity Name SUPERIOR LAND DEVELOPMENT, LLC DO NOT WRITE IN THIS SPACE 55015418 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE IN THIS SPACE 8. The above named entity submits this statement for the purpose of changin Make Check Payable to Florida Department of State DUE BY MAY 9. MANAGING MEMBERS/MANAGERS TITLE DEESTOROT NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORFOH 34683 CITY, ST. ZIP TITLE mue d' NAME Ä, NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-UP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE TILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 path; 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.

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BER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED

Daytime Phone #