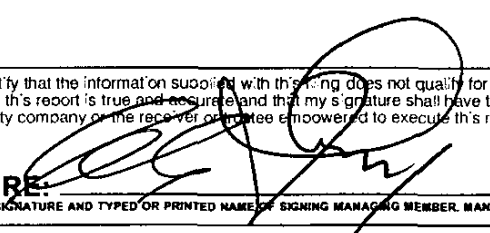


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90031 038 ****50.00

DOCUMENT # L03000010680 1. Entity Name FINAIR, LLC																													
Principal Place of Business 4300 MARSH LANDING BLVD SUITE 101 JACKSONVILLE BEACH, FL 32250			Mailing Address 4300 MARSH LANDING BLVD SUITE 101 JACKSONVILLE BEACH, FL 32250																										
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																										
City & State			City & State																										
Zip		Country		Zip																									
Country		Country		03292006 Chg-LLC CR2E083 (11/05)																									
4. FEI Number NOT APPLICABLE				Applied For ☐ Not Applicable																									
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required																									
6. Name and Address of Current Registered Agent FINLAY HOLDINGS, INC STE 101 4300 MARSH LANDING BLVD JACKSONVILLE BEACH, FL 32250				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number's Not Acceptable) City FL 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 _____ DATE _____ (Signature, typed or printed name of registered agent and the filer. (Typed or printed name of registered agent is required when filing.)																													
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State																											
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 40%;">MGRM</td> <td style="width: 10%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>FINLAY, CHRISTOPHER C</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4400 MARSH LANDING BLVD., STE. 3</td> <td></td> </tr> <tr> <td>CITY, ST, ZIP</td> <td>PONTE VEDRA BEACH, FL 32082</td> <td></td> </tr> </table> 10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 40%;"></td> <td style="width: 10%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY, ST, ZIP</td> <td></td> <td></td> </tr> </table>						TITLE	MGRM	☐ Delete	NAME	FINLAY, CHRISTOPHER C		STREET ADDRESS	4400 MARSH LANDING BLVD., STE. 3		CITY, ST, ZIP	PONTE VEDRA BEACH, FL 32082		TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY, ST, ZIP		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.																													
SIGNATURE:  <u>Christopher C. Finlay mgrm 4/4/06</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE																													