2008 LIMITED LIABILITY COMPANY

Mar 12, 2008 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT #L03000023150** 03-12-2008 90238 043 ***138.75 PRC INVESTORS III, LLC Principal Place of Business Mailing Address 60014158 13777 BELCHER ROAD SOUTH 13777 BELCHER ROAD SOUTH LARGO, FL 33771 LARGO, FL 33771 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01222008 Chg-LLC CR2E083 (12/06) City & State City & State Applied For 4. FELNumber 05-0574802 Not Applicable Zip 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 PIAZZA, JOHN J SR. Street Address (P.O. Box Number is Not Acceptable) 13777 BELCHER ROAD SOUTH LARGO, FL 33771 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) Make check payable to FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 Florida Department of State ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 9: 10. MGR TITLE Delete TITLE ☐ Change ☐ Addition NAME PIAZZA, JOHN J SR. NAME 13777 BELCHER ROAD S. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LARGO, FL 33771 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP TITLE TITLE Delete 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 CITY-ST-ZIP Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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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.

CITY-ST-ZIP

JRE: John J. Piazza REPRESENTATIVE