2005 LIMITED LIABILITY COMPANY

FILED Apr 28, 2005 8:00 am Secretary of State

| | | KEPUKI | | | _ | 04.30.3005.0 | 20027.0 | an **** | .00 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-----------------------------------|-----------------------|----------------------------------|----------------------------------------|
| DOCUI 1. Entity Name 3DP, LLC | | 424 | | | | 04-28-2005 S | | 20 ****30 | .00 |
| Principal Place of Business 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 Mailing Address 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL | | | 33315 | | 1 (33)(6)(8)(| | | 1811 81810 HBH BIR | sel lili (SB) |
| 2. Principal Pl | lace of Business | 3. Mailing Address | | | - | | | | |
| 2853 Executive Park Dr. Suite, Apt. #, etc. | | P.O. Box 266366 Suite, Apt. #, etc. | | - | | III BPIB U 1111 0 3 | 1941) BIBIB (CDI) B34 | 991 III (ME) | |
| Suite, Apt. | | Suite, Apt. #, etc. | | | 04152005 | Chg-LLC | CR2E | 083 (10/03) | |
| City & State | 9 | City & State | | | 4. FEI Numbe | | | | plied For |
| Weston, | | Weston, FL | C | | 20-0306 | 5097 | | | t Applicable |
| Zip | Country | Zip 333-26 | Counti | • | 5. Certificate | of Status Desired | | \$5.00 Add _Fee Required | itional d: |
| 33326 | 6. Name and Address of Current | Registered Agent | | ·A. | 7. Name and | Address of New F | tegiste red | | <u> </u> |
| | | | | Name | | | | | |
| HUME, JOHN C/O HUME & JOHNSON, P.A. | | | | Street Address | treet Address (P.O. Box Number is Not Acceptable) | | | | |
| | ERSITY DR., STE. 301 | | - | | | | | | |
| CORAL SF | PRINGS, FL 33071 | | | | | | | | |
| | | | Ī | City | | | - FI | Zip Code | e |
| 8. The above | ramed entity submits this statement fo | r the purpose of changing its : | registere | d office or registe | ered agent, or bot | h, in the State of FI | orida. Lam | n familiar with, | and accept |
| the obligati | ions of registered agent. | | | | | | حالنا | 1- | |
| SIGNATURE . | Signature, typed or printed name of registered agent | and title if applicable. (NOTE: | | Agent signature require | | | 7/12 | 102 | |
| | / / / | - 1 | | | | | | | |
| Fi Di | ling Fee is \$50.00 ue by May 1, 2005 | | | | | | | payable to ment of State | |
| Fi Di | MANAGING MEMBE | | 10. | | | | a Departr | ment of State | |
| 9. | MANAGING MEMBE | RS/MANAGERS De Delete | TITLE | | | Florid | a Departr | ment of State | Addition |
| 9. TITLE NAME | MANAGING MEMBE MGR ALVARADO, ROBERTO | | TITLE NAME | : | | Florid | a Departr | ment of State | |
| 9. | MANAGING MEMBE | Delete | TITLE NAME STREE | | | Florid | a Departr | ment of State | |
| 9. TITLE NAME STREET ADDRESS | MANAGING MEMBE MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE | De Delete □ Delete | TITLE NAME STREE | ET ADORESS ST-ZIP | | Florid | a Departr | ment of State | |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | MANAGING MEMBE MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE | De Delete | TITLE NAME STREE CITY- TITLE NAME | ET ADDRESS ST-ZIP | | Florid | a Departr | S Change | ☐ Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | MANAGING MEMBE MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FINOL, ANDRES, | De Delete DR · STE 301 | TITLE NAME STREE CITY- TITLE NAME STREE | ET ADDRESS ST-ZIP ET ADDRESS | | Florid | a Departr | S Change | ☐ Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | MANAGING MEMBE MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FINOL, ANDRES, INOL UNIVERSITY CORAL SPRING FL | Delete Delete DR - STE 301 33071 | TITLE NAME STREE CITY- TITLE NAME STREE CITY- | ET ADDRESS ST-ZIP E ET ADDRESS | | Florid | a Departr | S Change | Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | MANAGING MEMBE MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FINOL, ANDRES, ILLOI UNIVERSITY CORAL SPRING FL MANAGING MEM MANAGING MEM COROLLOR ALVARO | Delete Delete DR STE 301 33071 BEN Delete | TITLE NAME STREE CITY- TITLE NAME STREE | ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ST-ZIP | | Florid | a Departr | S Change | ☐ Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE | MANAGING MEMBE MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FINOL, ANDRES, ILLOI UNIVERSITY CORAL SPRING FL MANAGING MEM GORRIN, ALVARO LUON S DIXIE HY | Delete DR STE 301 33071 3 | TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME NAME | ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ST-ZIP | | Florid | a Departr | S Change | Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME | MANAGING MEMBE MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FINOL, ANDRES, ILLOI UNIVERSITY CORAL SPRING FL MANAGING MEM G GORRIN, ALVARG LOO S DIXIE HY CORAL GABLES | Delete DR STE 301 33071 3 | TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE STREE | ET ADORESS ST-ZIP | | Florid | a Departr | S Change | Addition Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | MANAGING MEMBE MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FÍNOL, ANDRES, ILLOI UNIVERSITY CORAL SPRING FL MANAGING MEM G GORZIN, ALVARG LOO S DIXIE HY CORAL GABLES SECRETARY | Delete Delete DR STE 301 33071 BER Delete Delete The belete | TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE | ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | | Florid | a Departr | S Change | Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | MANAGING MEMBE MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FÍNOL, ANDRES, ILLOI UNIVERSITY CORAL SPRING FL MANAGING MEM G GORZIN, ALVARG LOO S DIXIE HY CORAL GABLES SECRETARY | Delete Delete DR STE 301 33071 BER Delete Delete The belete | TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME | ET ADORESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP | | Florid | a Departr | S Change | Addition Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | MANAGING MEMBER MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FINOL, ANDRES, INOI UNIVERSITY CORAL SPRING FL MANAGING MEMBE GORRIN, ALVARO GORRIN, ALVARO CORAL GABRES SECRETARY MORENO, (LONA) UDO C DIXIE H | Delete DR STE 301 33071 3 | TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE | ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | | Florid | a Departr | S Change | Addition Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS | MANAGING MEMBE MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FÍNOL, ANDRES, ILLOI UNIVERSITY CORAL SPRING FL MANAGING MEM G GORZIN, ALVARG LOO S DIXIE HY CORAL GABLES SECRETARY | Delete DR STE 301 33071 3 | TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE | ET ADDRESS ST-ZIP | | Florid | a Departr | S Change | Addition Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP | MANAGING MEMBER MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FINOL, ANDRES, INOI UNIVERSITY CORAL SPRING FL MANAGING MEMBE GORRIN, ALVARO GORRIN, ALVARO CORAL GABRES SECRETARY MORENO, (LONA) UDO C DIXIE H | Delete DR STE 301 33071 BEN Delete WY FL 331846 CIO WY FL 33146 | TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME CITY- TITLE NAME CITY- | ET ADDRESS ST-ZIP | | Florid | a Departr | S Change Change Change | Addition Addition Addition Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | MANAGING MEMBER MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FINOL, ANDRES, INOI UNIVERSITY CORAL SPRING FL MANAGING MEMBE GORRIN, ALVARO GORRIN, ALVARO CORAL GABRES SECRETARY MORENO, (LONA) UDO C DIXIE H | Delete DR STE 301 33071 BEN Delete WY FL 331846 CIO WY FL 33146 | TITLE NAME STREE CITY- | ET ADDRESS ST-ZIP | | Florid | a Departr | S Change Change Change | Addition Addition Addition Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP | MANAGING MEMBER MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FINOL, ANDRES, INOI UNIVERSITY CORAL SPRING FL MANAGING MEMBE GORRIN, ALVARO GORRIN, ALVARO CORAL GABRES SECRETARY MORENO, (LONA) UDO C DIXIE H | Delete DR STE 301 33071 BEN Delete WY FL 331846 Delete WY FL 331846 | TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME CITY- TITLE NAME CITY- TITLE NAME CITY- | ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP | | Florid | a Departr | S Change Change Change Change | Addition Addition Addition Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | MANAGING MEMBER MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FINOL, ANDRES, INOI UNIVERSITY CORAL SPRING FL MANAGING MEMBE GORRIN, ALVARO GORRIN, ALVARO CORAL GABRES SECRETARY MORENO, (LONA) UDO C DIXIE H | Delete DR STE 301 33071 BEN Delete WY FL 331846 CIO WY FL 33146 | TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME CITY- TITLE NAME TITLE TITLE TITLE | ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | | Florid | a Departr | S Change Change Change | Addition Addition Addition Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP | MANAGING MEMBER MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FINOL, ANDRES, INOI UNIVERSITY CORAL SPRING FL MANAGING MEMBE GORRIN, ALVARO GORRIN, ALVARO CORAL GABRES SECRETARY MORENO, (LONA) UDO C DIXIE H | Delete DR STE 301 33071 BEN Delete WY FL 331846 Delete WY FL 331846 | TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME | ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | | Florid | a Departr | S Change Change Change Change | Addition Addition Addition Addition |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | MANAGING MEMBER MGR ALVARADO, ROBERTO 3495 S.W. 9TH AVE. FORT LAUDERDALE, FL 33315 MANAGING MEMBE FINOL, ANDRES, INOI UNIVERSITY CORAL SPRING FL MANAGING MEMBE GORRIN, ALVARO GORRIN, ALVARO CORAL GABRES SECRETARY MORENO, (LONA) UDO C DIXIE H | Delete DR STE 301 33071 BEN Delete WY FL 331846 Delete WY FL 331846 | TITLE NAME STREE CITY- TITLE NAME STREE | ET ADDRESS ST-ZIP | | Florid | a Departr | S Change Change Change Change | Addition Addition Addition Addition |

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.

CIONATURE / MINEN

4/15/05 30T-6697988

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Daytin