2004 LIMITED LIABILITY COMPANY 3/

FILED Mar 23, 2004 8:00 am Secretary of State

				<u>.</u>		
1. Entity Nam	MENT # L03000052 LO INVESTORS GROUP-			03-08-2004 90275 033 ****50.0	00	
Principal Place	e of Business	Mailing Address	<u> </u>	7401401		
6970 CALLE DIA 6970 CALLE DIA				34001991		
CAMARILLO, CA 93012 CAMARILLO, CA 93012						
STREET STREET,	on JUIL	Seattliners, at 13015		•		
				. I SEANARA DIN TERTE NIKI BERKA DIN BERKA DERIK DERIK DERIK BUIL RATE DIN KETEL DIN KERADA I		
2. Principal P	lace of Business	3. Mailing Address				
				4 IBBLISTS Of BESEN (SUL BOTH OFFIL PEST BOIDS OFFIN THEM STATE WITH IBADES 10 1784		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02242004 Chg-LLC CR2E083 (10/03)		
				02242004 Gilg-LLC Ch2E003 (10/03)		
City & State		City & State		4. FEI Number A A A A A A A A A A A A A A A A A A A		
				76-0749836 Not Applice	able	
Žiρ	Country	Zip	Country	5. Certificate of Status Desired \$5.00 Additional		
	1			5. Certificate of Status Desired Fee Required		
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent		
			Name		\neg	
	ORATION SYSTEM			(O.O. Packatana and Alexanders)		
	TH PINE ISLAND ROAD		Street Address	(P.O. Box Number is Not Acceptable)		
PLANTATI	ION, FL 33324					
	•			*		
· · -			City -	FL Zip Code	1	
	- Marie and Mari					
	named entity submits this statement to tions of registered agent.	or the purpose of changing its r	egistered office or registe	ered agent, or both, in the State of Florida. I am familiar with, and acc	epi	
i ie congat	ions or redistaten site.	_		•	- 1	
SIGNATURE.	-				- 1	
	Signature, typed or printed name of registered agen					
		Tanta star ir appreciation. (NOTE:	Registered Agent signature require	ed when reinstating) DATE		
		mand the a supposable. (NOTE:	Registered Agent signéture require		\dashv	
F		mand care a expectation. (NOTE:	Registered Agent agneture require	Make check payable to	7	
Fi D	iling Fee is \$50.00 ue by May 1, 2004	I and car y apporation. (NOTE.	Registered Agent signeture requir		╡.	
	lling Fee is \$50,00 ue by May 1, 2004			Make check payable to Florida Department of State	- -	
9.	lling Fee is \$50.00 ue by May 1, 2004 MANAGING MEMB	ERS/MANAGERS	10.	Make check payable to Florida Department of State ADDITIONS/CHANGES		
9. TITLE	lling Fee is \$50.00 ue by May 1, 2004 MANAGING MEMB		10.	Make check payable to Florida Department of State	ition	
9. TITLE NAME	lling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ	ERS/MANAGERS	10. TITLE NAME	Make check payable to Florida Department of State ADDITIONS/CHANGES	ition	
9. TITLE NAME STREET ADDRESS	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS	10. TITLE NAME STREET ADDRESS	Make check payable to Florida Department of State ADDITIONS/CHANGES	ition	
9. TITLE NAME	lling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ	ERS/MANAGERS	10. TITLE NAME	Make check payable to Florida Department of State ADDITIONS/CHANGES	ition	
9. TITLE NAME STREET ADDRESS	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS	10. TITLE NAME STREET ADDRESS	Make check payable to Florida Department of State ADDITIONS/CHANGES		
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add		
9. YITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add		
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add		
B. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add	lition	
B. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add	lillon	
D. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add	lillon	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add	lillon	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add Change Add	ition	
G. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete	TITLE NAME STREET ADDRESS	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add	ition	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete Delete	10. TITLE NAME STREET ADDRESS	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add Change Add	ition	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add Change Add	ition	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add Change Add Change Add	ition	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete Delete	TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add Change Add	ition	
G. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete Delete Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add Change Add Change Add	ition	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete Delete Delete	TIO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add Change Add Change Add	ition	
G. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete Delete Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add Change Add Change Add	ition	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete Delete Delete	TIO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add Change Add Change Add	ition	
G. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add Change Add Change Add Change Add Change Add Change Add	ition	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add Change Add Change Add Change Add Change Add Change Add	ition	
G. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Iling Fee is \$50,00 ue by May 1, 2004 MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE DIA	ERS/MANAGERS Delete Delete Delete	TIO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add Change Add Change Add Change Add Change Add Change Add	ition	
G. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMB MANAGING MEMB MGRM SACHDEV, RAJ 6970 CALLE-DIA CAMARILLO, CA 93012	ERS/MANAGERS Delete Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Make check payable to Florida Department of State ADDITIONS/CHANGES Change Add Change Add Change Add Change Add Change Add Change Add	ition	

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.

.