2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 30, 2008 8:00 am Secretary of State 04-30-2008 90024 009 ***138.75

DOCUMENT # L0400 1. Entity Name THE COVE LLC	00002196		_
Principal Place of Business 3731 NE PINEAPPLE AVE SUITE C200 JENSEN BEACH, FL 34957	Mailing Address 3731 NE PINEAPPLE AV JENSEN BEACH, FL 349		
2. Principal Place of Business - No PO. E	Box # 3. Mailing Address		100000 00 000 000 000 000 000 000
Suite, Apt. #, etc.	Suite, Apt. #, etc.		03282008 Cng-LLC CR2E083 (12/06)
City & State	City & State		4. FEI Number Applied For NOT APPLICABLE Not Applicable
Zip Country	Zíp	Country	5. Certificate of Status Desired S5.00 Additional Fee Required
Name and Address of Current Registered Agent		Name	7. Name and Address of New Registered Agent
FOX, M. LANNING 3473 SE WILLOUGHBY BLVD		Street Address	(P.O. Box Number is Not Acceptable)
STUART, FL 34994			
		City	FL Zip Code
The above named entity submits this st the obligations of registered agent.	tatement for the purpose of changing its	registered office or registe	ered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	owlered yout and this it applicable. (NYTE	Registered Agent signature requires	nd when reinstating) DATE
FILE NOW!!! FEE IS \$138 After May 1, 2008 Fee will be			Make check payable to Florida Department of State
	IG MEMBERS/MANAGERS	10.	ADDITIONS/CHANGES
NAME DOSS, ARDEN JR STREET ADDRESS 3731 NE PINEAPPLE A CITY-ST-ZIP JENSEN BEACH, FL 3		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
ITILE MGRM NAME DOSS, RENEE' M STREET ADDRESS 3731 NE PINEAPPLE A CITY-ST-ZIP JENSEN BEACH, FL 3		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addinon
TITLE ASCT NAME DOSS, RENEE' M STREET ADDRESS 3731 NE PINEAPPLE A CITY-ST-ZIP JENSEN BEACH, FL 3		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE VPST ROWE, RHONDA S STREET ADDRESS 3731 NE PINEAPPLE A LENGTH JENSEN BEACH, FL 3		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition (
indicated on this report is true and aclimited liability company or the receive	pplied with this filing does not qualify for curare and that my signature shall have tier or trustee empowered to execute this research	he same legal effect as if report as required by Chap	411/08 772-692-7800

RHONDA S. ROWE