2008 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Mar 06, 2008 08:00 A **DOCUMENT # L04000030393** Secretary of State NICHOLS INVESTMENTS, LLC Mailing Address Principal Place of Business **2620 CARTER LANE 2620 CARTER LANE** LAKE WORTH, FL 33460 LAKE WORTH, FL 33460 02262008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1011964 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NICHOLS, MARK DO NOT WRITE 2620 CARTER LANE LAKE WORTH, FL. 33460 IN THIS SPACE 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 title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE !8 \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE U00000849972 03/21/08-80042-018 138.75 NICHOLS, MARK NAME 2620 CARTER LANE STREET ADDRESS CITY-ST-ZIP LAKE WORTH, FL 33460 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information to and mat my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the trustee empowered to execute this report as required by Chapter 608, Florida Statutes. 11. I hereby certify that the information supplied indicated on this report is true and accommitted liability company or the received of

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

> PRINTED TRUME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE SIGNATURE AND TYPE

Daytime Phone #