Jun 23, 2008 8:00 am Secretary of State **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT** DOCUMENT # L04000035631 06-23-2008 90155 023 ***538.75 1. Entity Name ONE PARTNER, LLC Principal Place of Business Mailing Address 50007353 132 VIA MARIPOSA 132 VIA MARIPOSA PALM BEACH GARDENS, FL 33418-6211 PALM BEACH GARDENS, FL 33418-6211 03072008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number 86-1107632 \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GREENBERG, ANDREW DO NOT WRITE 132 VIA MARIPOSA PALM BEACH GARDENS, FL 33418-6211 IN THIS SPACE

8.	. The above named ϵ	ntity submits this stateme	ent for the purpose of cha	inging its registered offic	e or registered agent, or b	oth, in the State of Florida.	I am familiar with,	and accept
	the obligations of reg							
	·	€C ^T						

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GREENBERG, ANDREW 132 VIA MARIPOSA PALM BEACH GARDENS, FL 334186211				
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indicated	I. I hereby certify that the information supplied with this filing does not qualify for the				

Signature, typed or printed name of registered agent and title if applicable.

DO NOT WRITE IN THIS SPACE

FILED

DATE

Applied For

Not Applicable

alify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information have the same legal effect as if made under oath; that I am a managing member or manager of the other than the first that I am a managing member or manager of the other than the first that I am a managing member or manager of the other than the first that I am a managing member or manager of the other than the first that I am a managing member or manager of the other than the first that I am a managing member of the other than the first that I am a managing member or manager of the other than the first that I am a managing member or manager of the other than the othe limited liability company

SIGNATURE:

PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #