2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT # L04000039180

1. Entity Name
MARLIN INDUSTRIAL PARK ASSOCIATES, LLC

FILED
08 JUL 24 PM 1:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1653 SE 6TH ST
DEERFIELD BEACH, FL 33441

Mailing Address
1653 SE 6TH ST
DEERFIELD BEACH, FL 33441

06202008 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
4001 N. 3rd St. #480	4001 N. 3rd St. #480
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Phoenix, AZ	City & State: Phoenix, AZ
Zip: 85012 Country: USA	Zip: 85012 Country:

4. FEI Number: 20-1257943 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DUNAY, GARY S
5355 TOWN CENTER ROAD, #801
BOCA RATON, FL 33486

7. Name and Address of New Registered Agent

Name: Gerald G. Macera
Street Address (P.O. Box Number Is Not Acceptable): 828 Forsyth Street
City: Boca Raton FL Zip Code: 33487

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: [signature] DATE: 6/23/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is $50.00

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM ALBANESE, STEPHEN 1653 SE 6TH ST DEERFIELD BEACH, FL 33441	☒ Delete	TITLE MRGM Michael Macera 4001 N. 3rd St. #480 Phoenix, AZ 85012	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	800133689828 07/29/08--01009--001 **50.00	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: [signature] Michael Macera 6/23/08 602-977-2044
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #