2008 LIMITED LIABILITY CCAPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008 3

FILED Apr 02, 2008 8:00 am Secretary of State

DOCUMENT # L0400064988 1. Entity Name					03-04-2008 90105 050 ***138.75			
B SQUARED PROPERTIES, LLC								
Principal Prac	e of Business	Mailing Address						
		P.O. BOX 533651 ORLANDO FL 32853			! Estimate and extra class extra extra	Pangk dagik dikil dinin inini milik	Tillia m ern	
2. Principal Place of Business - No P.O. Box # 3. Mailing Address 123 Woodwillo Are 123 Woodw			ville Av	,			omer pi inn.	
Suite, Apt. #, etc. Suite, Apt. #, etc.			7702		1st MOORE CR2E083 (10/07)			
Gily & State Green; He SC		City & State SC		4. FEI N	20-163340	□	polied For ox Applicable	
Zin 407 Country USA		29607	Country	5. Certifi	cate of Status Desired	S5.00 Ac	Iditional	
	6. Name and Address of Current F			7. Name	and Address of New F	Registered Agent		
Name								
EXNER, TIMOTHY W 1208 LAKE WILLISARA CIRCLE ORLANDO FL 32806			Street Address (P.O. Box Number is Not, Acceptable)					
					_ · · · · · · · · · · · · · · · · · · ·	· . · . ———		
	·		City	و. `		FL Zin Go	18	
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								
SIGNATURE Signature seed in the accordance of the accordance (NOTE Registered against signature inquiries of the accordance of the accorda								
Signification norw besuppor auditing a recording a first programment of the programment o								
FILE NOW (II. FEE IS \$138.75								
9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES								
TITLE	MGR	☐ Ôefate	TITLE			☐ Change	Addition	
NAME	EXNER, TIMOTHY W	•	NAME	•				
STREET ADDRESS CITY-ST-ZIP	1208 LAKE WILLISARA CIRCLE ORLANDO FL 32806		STREET ADDRESS					
TIPLE	MGR	☐ Deteto	TITLE			☐ Change	Addition	
NAME	TUSCAN, ERIC		NAME					
STREET ADDRESS CITY-ST-20P	123 WOODVILLE AVENUE	İ	STREET ADDRESS CITY-ST-ZIP					
Title	GREENVILLE SC 26607	☐ Delete	RILE			☐ Change	Addition	
NAME		L. Delete	NAME -			L1 citalite		
STREET ADDRESS CITY-ST-ZIP		<u> </u>	STPEET ADDRESS City-51-2P		-			
TITLE		☐ Celete	TITLE			☐ Change	Addition	
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP		!	STREET ADDRESS City-Si-Jp					
Tatle		Delete	TITLE		···-	☐ Change	Addition	
HAME			NAME				_	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS City-51-28					
TITLE		Delete	TITLE			☐ Change	☐ Addition	
HAME		C DEIGIE	NAME					
STREET ADDRESS		İ	STREET ADDRESS				ļ	
CITY-ST-ZIP			CITY-ST-ZIF			1 1 2 2 2 2 2 2 2 2 2 2		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.								
A 1/2 2/2/2 - 1/2 C.12000								
SIGNATURE: SIGNATURE: 32/08 2/8/08 864-991-9018								



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 17, 2008

B SQUARED PROPERTIES, LLC 123 WOODVILLE AVE **GREENVILLE, SC 29607**

Subject: B SQUARED PROPERTIES, LLC

Reference Number:

L04000064988

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$138.75; however, the report has not been filed and a copy is being returned for the following correction(s):

The registered agent must have a Florida street address.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/SK ANNUAL REPORTS SECTION

Torrected !! Please leave Regretered Agent as timothy w. Exner.

Sorry for the confusion!

P.O. BOX 6478 - Tallahassee, Florida 32314