

2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000071102

FILED
Aug 24, 2005
Secretary of State**Entity Name:** S3 INVESTMENTS III, LLC**Current Principal Place of Business:**55 LINTEL DRIVE
MCMURRAY, PA 15317**New Principal Place of Business:****Current Mailing Address:**55 LINTEL DRIVE
MCMURRAY, PA 15317**New Mailing Address:****FEI Number:** 20-1686170**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US**Name and Address of New Registered Agent:**SHETH, KETAN C
1532 DREXEL AVENUE
MIAMI BEACH, FL 33139 US

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.

SIGNATURE: KETAN C . SHETH

08/24/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:Title: MGRM () Delete
Name: SHETH, MALAY
Address: 55 LINTEL DRIVE
City-St-Zip: MCMURRAY, PA 15317Title: MGRM (X) Delete
Name: SHETH, KETAN
Address: 55 LINTEL DRIVE
City-St-Zip: MCMURRAY, PA 15317Title: MGRM () Delete
Name: STOCKER, KEVIN
Address: 55 LINTEL DRIVE
City-St-Zip: MCMURRAY, PA 15317**ADDITIONS/CHANGES:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MALAY C SHETH

MGRM

08/24/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date