FILED Apr 25, 2008 08:00 AN Secretary of State

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000092623 1. Entity Name 2PM, LLC						
Principal Place of Business Mailing Address 7567 PRESERVATION ROAD 2290 TENTH AVE NORTH TALLAHASSEE, FL 32312 SUITE 304 LAKE WORTH, FL 33461				## 60 00 (1246 0810 041		
						- Page High III Ian
DO NOT WRITE IN THIS SPACE			CE	01152008No Chg-LLC 4. FEI Number	CR2E083 (Applied For
on en organi El marketolek				20-2107406 5. Certificate of Status Desired		Not Applicable O Additional
grand as digital	6. Name and Address of Current Re	ingen führe für begület. Iglatered Agent			Fee F	Required
LINDSEY, WM. SCOTT 1407 PIEDMONT DRIVE EAST TALLAHASSEE, FL 31312				DO NOT W	经有效的基本。	
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, typod or printed name of registered agent and	d tide if applicable (NOTE: Register	ed Agent signature required	when reinstaling)	DATE	
	NOW!!! FEE IS \$138.76 1, 2008 Fee will be \$538.75			U000 05/15/0	000321389 08-80004-	021 138.75
9.	MANAGING MEMBER	S/MANAGERS			.7 . 7	*
TATLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM R.O.M. MANAGEMENT, INC. 7567 PRESERVATION ROAD TALLAHASSEE, FL 32312					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE HATAE: STREET ADDRESS CITY-S1-ZIP				DO NOT W	/RITE	
HTLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS S	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
maicalea	certify that the information supplied with on this report is true and accurate and ability company or the receiver a trustee	inat my signature snak nave (ne s:	ame legel ellect as i	if made under oath: that I am a m	. Hurther certify the anaging member	hat the information or manager of the
SIGNAT	URE:	RIGHTM MANAGING MEMBER, OR AUTHORI	on Wahl ZED REPRESENTATIVE	01/15/20	DB Daytere	Phone 9