2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

3.

FILED
May 30, 2006 8:00 am
Secretary of State

03-13-2006 90349 049 ****50.00

DOCUMENT # L05000024072

1. Entity Name
SEPCO INVESTMENTS ONE LLC

Principal Place of Business	Mailing Address
1007 EGRET COURT EDGEWATER, FL 32132	1007 EGRET COURT EDGEWATER, FL 32132

03042006 Chg-LLC CR2E083 (11/05)

2. Principal Place of Business	3. Mailing Address
609 sea gull	609 sea gull
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country: 32141	Zip: 32141 / Country

4. FEI Number: 20-4791071 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KHAN, NAJEEB 1007 EGRET COURT EDGEWATER, FL 32132	Name: Street Address (P.O. Box Number is Not Acceptable): 609 SEA GULL City: FL Zip Code: 32141

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] 03/09/06.
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00 Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM KHAN, NAJEEB 1007 EGRET COURT EDGEWATER, FL 32132 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	609 sea gull Edgewater FL 32141 ☑ Change ☐ Addition
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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] 03/09/06 (386) 4235117.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #