2008 LIMITED LIABILITY COMPANY

Jun 18, 2008 8:00 am Secretary of State **DOCUMENT # L05000028486** 05-15-2008 90074 011 ***138.75 **GULF BREEZE GYMNASTICS, LLC** Principal Place of Business Mailing Address 2100 EAST MALLORY STREET 2910 GULF BREEZE PARKWAY **GULF BREEZE, FL 32563** PENSACOLA, FL 32503 02192008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 20-2549851 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent YONEHIRO, SUSAN K DO NOT WRITE 2100 EAST MALLORY STREET PENSACOLA, FL 32503 IN THIS SPACE 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. (NOTE: Remissered Agent pigneture regularly when regist FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE YONEHIRO, SUSAN K NAME 2100 EAST MALLORY STREET STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32503 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE THLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP INLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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. Dad Mi SIGNATURE:

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SIGNATURE AND TYPED OR PROTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIV

FILED