## 2007 LIMITED LIABILITY COMPANY

NUME STREET ADDRESS CITY-ST-ZIP TILE MAKE STREET ADDRESS CITY-ST-ZIP

## **FILED ANNUAL REPORT** Jan 25, 2007 08:00 AN DOCUMENT # L05000064009 **Secretary of State** THE BUTTERFLY COMPANY, LLC Principal Place of Business Mailing Address 2750 STICKNEY POINT ROAD, SUITE 102 2750 STICKNEY POINT ROAD, SUITE 102 SARASOTA, FL 34231 SARASOTA, FL 34231 01202007 No Chq-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-3126210 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent ROTOLE, GREGORY S DO NOT WRITE 2750 STICKNEY POINT ROAD, SUITE 102 SARASOTA, FL 34231 IN THIS SPACE 1. 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, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 9. MANAGING MEMBERS/MANAGERS TITLE MGRM ROTOLE, GREGORY 2750 STICKNEY POINT ROAD, SUITE 102 STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34231 NAME STREET ADDRESS U00000603736 01/29/07-80024-018 50.00 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-SI-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-78P

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.