2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SECRETARY OF STATE DIVISION OF CORPORATIONS **DOCUMENT #L05000064879** 1. Entity Name OPINION LLC 06 MAY -1 AM 8: 58 Principal Place of Business Mailing Address 2665 SOUTH BAYSHORE DRIVE 2665 SOUTH BAYSHORE DRIVE **SUITE 703** SUITE 703 MIAMI, FL 33133 MIAMI, FL 33133 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. b4202006 Chg-LLC CR2E083 (11/05) City & State 4. FEI Number City & State Applied For 20-3466955 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WORLD CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 2665 SOUTH BAYSHORE DRIVE SUITE 703 MIAMI, FL 33133 City Zip Code 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, 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 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. TITLE MGR TITLE ☐ Change Addition ☐ Delete RICHARDS, TIMOTHY D NAME NAME STREET ADDRESS 2665 SOUTH BAYSHORE DRIVE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33133 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME 300075287113 05/25/06--01024--022 **90 STREET ADDRESS STREET ADDRESS **900.00 CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 4/20/06 (305) 858-9900 NG MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

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