2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000083943

3100-402 DIAN ROAD

TALLAHASSEE, FL 323041111

Address:

City-St-Zip:

Entity Name: 3100-402 DIAN ROAD TALLAHASSEE, LLC

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: EQUIVEST, INC. 9032 SW 152 STREET 8930 W STATE ROAD 84 #170 MIAMI, FL 33157 DAVIE, FL 33324 **New Mailing Address: Current Mailing Address:** EQUIVEST, INC 8930 W STATE ROAD 84 #170 DAVIE, FL 33324 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JONES, DARYL 15820 ŚW 98 COURT MIAMI, FL 33157 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. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete EQUIVEST, INC. Name: Name: Address: 8930 W STATE ROAD 84 #170 Address: City-St-Zip: DAVIE, FL 33324 City-St-Zip: Title: MGRM Title: () Delete () Change () Addition Name: BOIK, ALEX Name: Address: 10850 SW 69 DRIVE Address: City-St-Zip: MIAMI, FL 33173 City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition JONES, DUREL Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

Address:

City-St-Zip:

SIGNATURE: SEBRINA JAMES MGR 04/30/2008