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Jun 28, 2006 8:00 am
Secretary of State
04-18-2006 90007 011 ****50.00

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000085632

1. Entity Name
1709B, LLC

30011291

03102006 Chg-LLC CR2E083 (11/05)

Principal Place of Business	Mailing Address
C/O JONES, FOSTER, JOHNSTON & STUBBS, P.A. 505 SOUTH FLAGLER DRIVE, #1100 WEST PALM BEACH, FL 33401	C/O JONES, FOSTER, JOHNSTON & STUBBS, P.A. 505 SOUTH FLAGLER DRIVE, #1100 WEST PALM BEACH, FL 33401
2. Principal Place of Business: 2801 Long Meadow Dr.	3. Mailing Address: 2801 Long Meadow Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: West Palm Beach, FL	City & State: West Palm Beach, FL
Zip: 33414 Country: USA	Zip: 33414 Country: USA

4. FEI Number ☐ Applied For ☑ Not Applicable

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

6. Name and Address of Current Registered Agent

JONES FOSTER SERVICE, LLC
505 SOUTH FLAGER DRIVE, SUITE 1100
WEST PALM BEACH, FL 33401

7. Name and Address of New Registered Agent

Name: Jerry Singer, M.D.
Street Address (P.O. Box Number is Not Acceptable): 2801 Long Meadow Dr.
City: West Palm Beach, FL Zip Code: 33414

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: ✓ Jerry Singer Kenneth Korder ✓ 4/5/06
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	MANAGING MEMBER KENNETH KORDER 6 OLD FARM LANE OLD WESTBURY, NY 11568 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member Kenneth Korder 6 Old Farm Lane Old Westbury, NY 11568 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: ✓ Kenneth Korder Kenneth Korder ✓ 4/10/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #