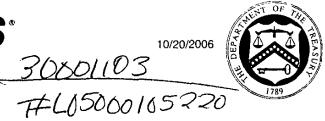
FILED Feb 23, 2007 8:00 am Secretary of State

DOCUMENT # L05000105220 1. Entity Name BANKERS COMPANIES, L.L.C.					01-29-2007 90148 013 ****50.00				
Principal Place 299 ALHAMB SUITE 404 CORAL GABLE		Mailing Address 299 ALHAMBRA CIRCL SUITE 404 CORAL GABLES, FL 3:				7 JIRI III ONI NIK		TA ATTO EDE ET	IN A KA
·	ace of Business - No P.O. Box #	3. Mailing Address							Mam
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01042007	Chg-LLC	CR2E0	83 (12/06)	
City & State		City & State			4. FEI Numb		38141	8 1/1	plied For Applicable
Ζip	Country	Zip.	Coun	try	5. Certificat	e of Status Desired		\$5.00 Add	
	6. Name and Address of Current I	Registered Agent		Name	7. Name en	d Address, of New	Registered /	\gent	
SUITE 404	IBRA CIRCLE			<u></u>	(P.O. Box Number is Not Acceptable)				
CORAL GA	ABLES, FL 33134			City			FL	Zip Cod	
8. The above	named entity submits this statement for	the purpose of Changing its	s recester	ed office or maiste	red agent, or b	oth, in the State of		<u> </u>	
	Signature, head or provid name of registered agent of liting. Fore its \$50.00 are by May 1, 2007	and life if applicable (NO)	(E: Require	d Agent agresses require	ed when numblebrig)		DATE		
	MANAGING MEMBE	RS/MANAGERS	10.			ADDITION	S/CHANGES		
TITLE NAME STREET ADDRESS	MGR KHOSRAVI, SHAWN 299 ALHAMBRA CIRCLE, STE. 4	☐ Celete	JITL Haan Sire					☐ Change	Addition
COTY-ST-ZOP TOTALE	CORAL GABLES, FL 33134	D Delete	CITY	-51-20					-
KAME STREET ADDRESS CITY-ST-ZIP		C) Center	NAM STRE					☐ Change	☐ Addition
ITLE KAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						☐ Change	Addition
ITLE LAME STREET ADDRESS STY-ST-RP		☐ Delete	tift.	-	· · · · · · · · · · · · · · · · · · ·			☐ Change	Addition
TTLE LAME STREET ADDRESS STY-ST-02°		☐ Delate	HJU NAM SIR					Change	Addition
TITLE HAME STREET ADDRESS STY-ST-DP		☐ Delete	TIRU NAM STRE					Charge	Addition
11. I hereby of indicated limited list	partity that the information supplied with on this report is true and accurate and billity company or the recover or visited to the company of the recover or visited to the company of the recover or visited to the company or the company or visited to the company or the recover or visited to the company or the comp	this filing does not qualify in this my signature shall have employmend to execute this SHA	or the exertification in the same	mptions contained a legal effect as if a required by Char	in Chapter 115 made under cer ster 608, Florida	h; that I am a man Statutes.	further certify eping member	ormanage	rolthe

ATTACHMENT





BANKERS COMPANIES LLC SHAWN KHOSRAVI SOLE MBR 299 ALHAMBRA CIR STE 404 CORAL GABLES, FL 33134-0000

	III	(Taxpayer Identification Number
L ** 1 K * * e de ***	- -	20 0001410
		30-0381418

About Your E S Enrollment

Dear Taxpayer:

You were recently pre-enrolled in the Electronic Federal Tax Payment System (EFTPS) to make all your federal tax payments online or by phone.

According to our records...

You have not activated your enrollment yet. You can activate your enrollment by calling 1-800-555-3453 and supplying EFTPS with your bank account information and phone number. Please have your Employer Identification Number (EIN), EFTPS Personal Identification Number (PIN received previously by a separate mailing), and bank account information handy when you call.

It's important that you activate your enrollment as soon as possible so you can begin making your payments through EFTPS. Once you begin using EFTPS, you will see how convenient, easy, and fast it is to make a federal tax payment online or by phone. Plus, you will receive an immediate acknowledgement number for every transaction which acts as a receipt for your records.

If you have any questions or need assistance, please call EFTPS Customer Service at 1-800-555-4477.

Thank You.

EFTPS Enrollment Processing