2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# L05000113095

Entity Name: PT EX LLC

Current Principal Place of Business:

23800 WEST TEN MILE ROAD, SUITE 220
SOUTHFIELD, MI 48034

New Principal Place of Business:

23800 WEST TEN MILE ROAD
SUITE 220
SOUTHFIELD, MI 48033

Current Mailing Address:

23800 WEST TEN MILE ROAD, SUITE 220
SOUTHFIELD, MI 48034

New Mailing Address:

23800 WEST TEN MILE ROAD, SUITE 220
SOUTHFIELD, MI 48033

FEI Number: 20-3868540 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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:

Title: MGR ( ) Delete
Name: COHEN, WALTER
Address: 23800 WEST TEN MILE ROAD, SUITE 220
City-St-Zip: SOUTHFIELD, MI 48034

Title: MGR ( ) Delete
Name: FRIEDMAN, DAVID
Address: 23800 WEST TEN MILE ROAD, SUITE 220
City-St-Zip: SOUTHFIELD, MI 48034

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: COHEN, WALTER
Address: 23800 WEST TEN MILE ROAD, SUITE 220
City-St-Zip: SOUTHFIELD, MI 48033

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: WALTER COHEN MGR 04/23/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date