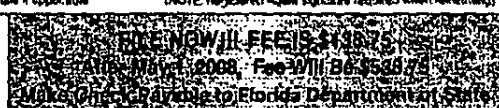


p. 2

FILED
Feb 07, 2008 08:00 A
Secretary of State

DOCUMENT # L06000011784				Secretary of																									
1. Entity Name DEE LLC																													
Principal Place of Business 1220 SUGARLOAF BOULEVARD SUMMERLAND KEY FL 33042		Mailing Address 1220 SUGARLOAF BOULEVARD SUMMERLAND KEY FL 33042																											
2. Principal Place of Business - No P.O. Box #		3. Mailing Address																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E083 (10/07)																									
City & State		City & State		4. FCI Number 20-4168411																									
Zip		Country		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required																									
6. Name and Address of Current Registered Agent MENSCH, SHIRLEY 1220 SUGARLOAF BOULEVARD SUMMERLAND KEY FL 33042			7. Name and Address of New Registered Agent																										
			Name																										
			Street Address (P.O. Box Number is Not Acceptable)																										
			City FL 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 _____ (NOTE: Registered Agent signature required when submitting) DATE _____																													
																													
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES																									
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u>Shirley Mensch</u> 2/5/08																													
SIGNATURE AND TYPED OR PRINTED NAME OF RECORDING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE																													