2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jul 11, 2007 8:00 am Secretary of State

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| | named entity submits this statement | for the purpose of changing its | registere | ed office or regis | itered agent, or bo | oth, in the State of Flo | rida. Tam tamiliar | with, a | and accept |
| the obligat | ions of registered agent. | | | | | | | | |
| CICNIATURE | | | | | | | | | |
| SIGNATURE . | Signature, typed or printed name of registered age | ant and title if applicable. (NOT | E: Registered | 1 Agent signature requ | ired when reinstating) | | DATE | | |
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| Fil Due t | oy September 14, 2007 | BERS/MANAGERS | 10. | | | Florida , | Department of | | |
| Due L | MANAGING MEM | | _ | | <u> </u> | | Department of | State | |
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| 9. TITLE NAME | MANAGING MEM MGRM ALLEN, ROY M | | TITLE | | | Florida , ADDITIONS/ | Department of | State | |
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