2007 LIMITED LIABILITY COMPANY

Jan 22, 2007 8:00 am ANNUAL REPORT **Secretary of State DOCUMENT #L06000107732** 01-22-2007 90148 050 ****50.00 GKD INVESTMENTS LLC Principal Place of Business Mailing Address 310 COUNTRY CLUB LANE 310 COUNTRY CLUB LANE ATLANTIC BEACH, FL 32233 ATLANTIC BEACH, FL 32233 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01172007 Chg-LLC CR2E083 (12/06) City & State 4. FEI Number City & State Applied For 32-0185981 Not Applicable Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WONG-CHAN, KAREN A Street Address (P.O. Box Number is Not Acceptable) 310 COUNTRY CLUB LANE ATLANTIC BEACH, FL 32233 City 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 reinstating) Filing Fee is \$50.00 Due by May 1, 2007 Make check payable to Fiorida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES TITLE MGRM 2 ☐ Delete TITLE Change ■ Addition WONG-ÉHAN, KAREN A NAME 310 COUNTRY CLUB LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ATLANTIC BEACH, FL 32233 CITY-ST-ZIP TITLE Delete TITLE Change ■ Addition NAME NAME STREET ADORESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P

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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.