

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 20, 2008 8:00 am
Secretary of State

05-22-2008 90512 023 ***138.75

DOCUMENT # L07000008645

1. Entity Name
THE LEX GROUP LLC



Principal Place of Business
**290 NW 165TH STREET
STE P-100
MIAMI, FL 33169**

Mailing Address
**290 NW 165TH STREET
STE P-100
MIAMI, FL 33169**

30009660



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06162008 Chg-LLC CR2E083 (12/06)

City & State

City & State

4. FEL Number **26-1982139** Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**BOX, ANTHONY D
290 NW 165TH STREET
STE P-100
MIAMI, FL 33169**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$538.75
Due by September 12, 2008**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **MGR** ☐ Delete
NAME **ANTHONY D BOX**
STREET ADDRESS **290 NW 165th Street P-100 Miami FL**
CITY-ST-ZIP

TITLE **MGR** ☐ Change ☒ Addition
NAME **NATHAN BOX**
STREET ADDRESS **16 NW 42nd Terrace**
CITY-ST-ZIP **PLANTATION, FL 33312**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE


Date

Daytime Phone #

4-29-08

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

5/22/2008-90512-023-\$138.75-\$138.75

DOCUMENT # L07000008645 1. Entity Name THE LEX GROUP LLC						ATTACHMENT	
Principal Place of Business 290 NW 165TH STREET STE P-100 MIAMI, FL 33169				Mailing Address 290 NW 165TH STREET STE P-100 MIAMI, FL 33169			
2. Principal Place of Business - No P.O. Box #				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 26-1982139				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent BOX, ANTHONY D 290 NW 165TH STREET STE P-100 MIAMI, FL 33169				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 reinstating) DATE _____							
FILE NOW!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
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SIGNATURE: <u><i>[Signature]</i></u>				Date: <u>4-29-08</u>			

30009660

MEMBER
NATUVA BOX
16 NW 42nd Terrace, Plantation FL 33317