2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 05, 2008 8:00 am
Secretary of State

04-04-2008 90138 049 ***138.75

DOCUMENT # L07000037601

1. Entity Name
ATHENA PROPERTUNITY FUND, LLC

Principal Place of Business	Mailing Address
301 YAMATO ROAD, SUITE 3198 BOCA RATON, FL 33431	301 YAMATO ROAD, SUITE 3198 BOCA RATON, FL 33431

03142008 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
950 Peninsula Corp Cir.		950 Peninsula Corp Cir	
Suite, Apt. #, etc.: Suite 2015		Suite, Apt. #, etc.: Suit 2015	
City & State: Boca Raton, FL		City & State: Boca Raton FL	
Zip: 33487	Country: USA	Zip: 33487	Country: USA

4. FEI Number 20-8798281 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SHL HOLDINGS, LLC
ATTN: STEVEN H. LEVENSON
301 YAMATO ROAD, SUITE 3198
BOCA RATON, FL 33431

7. Name and Address of New Registered Agent

Name: SAME
Street Address (P.O. Box Number is Not Acceptable): 950 Peninsula Corporate Circle
Suite 2015
City: Boca Raton FL Zip Code: 33487

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: Steven Levenson [signature] 3/31/08
Signature, typed or printed name of registered agent and title if applicable. (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	MGRM SHL HOLDINGS, LLC 301 YAMATO ROAD, SUITE 3198 BOCA RATON, FL 33431	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	950 Peninsula Corp Cir #2015 Boca Raton FL 33487	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: Steven Levenson [signature] 3/21/08 5619944804
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #