2008 LIMITED LIABILITY COMPANY ANNUAL REPORT-

Secretary of State **DOCUMENT # L07000069706** 03-05-2008 90207 021 ***138.75 1. Entity Name SETH HUNGERFORD LLC Principal Place of Business Mailing Address 30000401 1155 S.W. 28TH AVE. 1155 S.W. 28TH AVE. BOYNTON BEACH, FL 33426 **BOYNTON BEACH, FL 33426** 2. Principal Place of Business - No P.O. Box # 3. Malling Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04092008 Chg-LLC CR2E083 (12/06) 4. FEI Number City & State Applied For City & State Not Applicable Zip Zip Country Country \$5.00 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Hunger ford UNITED STATES CORPORATION AGENTS, INC. 13302 WINDING OAKS BLVD SUITE A-100 TAMPA, FL 33612-3425 BOYWION BEACH 8. The above named entity submits this statement to 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 registryed agen Make check payable to FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. TITLE MGRM TITLE ☐ Delete ☐ Change ☐ Addition HUNGERFORD, SETH P NAME MAME STREET ADDRESS 1155 S.W. 28TH AVE. STREET ADDRESS C17Y-ST-21P BOYNTON BEACH, FL 33426 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition HAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-219 CITY-ST-ZIP TILE ☐ Delete TITLE Change ☐ Addition NAME HALE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 outrustee empowered to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE:

FILED Jun 02, 2008 8:00 am