

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000117311

FILED
Jul 29, 2008
Secretary of State**Entity Name:** CULT FLORIDA, LLC**Current Principal Place of Business:**1508 BAY RD.
343
MIAMI BEACH, FL 33139**New Principal Place of Business:**11300 NW 131 ST
MEDLEY, FL 33178**Current Mailing Address:**1508 BAY RD.
343
MIAMI BEACH, FL 33139**New Mailing Address:**11300 NW 131 ST
MEDLEY, FL 33178**FEI Number:** 26-1445440**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PRITCHETT, JOHN
1508 BAY RD.
343
MIAMI BEACH, FL 33139 US**Name and Address of New Registered Agent:**PRITCHETT, JOHN
9510 SW 148 ST
MIAMI, FL 33176 US

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.

SIGNATURE: JOHN PRITCHETT

07/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CULT USA APS,
Address: 11300 N.W. 131ST
City-St-Zip: MEDLEY, FL 33178

Title: MGRM () Delete
Name: JJ&F ENTERPRISES, LL, C
Address: 11300 N.W. 131ST
City-St-Zip: MEDLEY, FL 33178

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MILKKELSEN, CARSTER S DIRECTO
Address: 1508 BAY RD. 107
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM (X) Change () Addition
Name: PRITCHETT, JOHN H DIRECTO
Address: 9510 SW 148 ST
City-St-Zip: MIAMI, FL 33176

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JOHN PRITCHETT

DRIE

07/29/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date