2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000082117

Entity Name: SCT MANAGEMENT COMPANY, LLC

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17875 COLLINS AVENUE 17885 COLLINS AVENUE

4001 4001

SUNNY ISLES BEACH, FL 33160 US SUNNY ISLES BEACH, FL 33160 US

Current Mailing Address: New Mailing Address:

5875 PEACHTREE INDUSTRIAL BLVD

NORCROSS, GA 30092 US

FEI Number: 26-3252442 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THAKKAR, NILOY
17875 COLLINS AVENUE
THAKKAR, NILOY
17885 COLLINS AVENUE

4001 4001

SUNNY ISLES BEACH, FL 33160 US SUNNY ISLES BEACH, FL 33160 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: NILOY THAKKAR 03/20/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition
Name: THAKKAR NII OY Name: THAKKAR NII OY

 Name:
 THAKKAR, NÎLOY
 Name:
 THAKKAR, NÎLOY

 Address:
 17875 COLLÎNS AVENUE UNIT 4001
 Address:
 17885 COLLÎNS AVENUE UNIT 4001

 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160 US
 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: RNCT, LLC, Name: RNCT, LLC,

 Address:
 17875 COLLINS AVENUE UNIT 4001
 Address:
 17885 COLLINS AVENUE UNIT 4001

 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160 US
 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: SMITH, STEVE S

Address: 17975 COLLINS AVENUE UNIT 4001

Address: 17875 COLLINS AVENUE UNIT 4001 Address: 17885 COLLINS AVENUE UNIT 4001 City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

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: NILOY THAKKAR MGR 03/20/2009