FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS FILIT G FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Malling Address of Limited Liability Company DOCUMENT # 195000005 7				FILED 98 FEB -4 MH: 20			
				SECRETARY OF STATE TALLAHASSEE, FLORIDA			
CHALLENGE De 11955 SW M, Am, F	evelopment 142 Terr 51 33186	- Compi	my, L.C.		55w 1	Address 42 terr 1 33186	
2. Principal Place of Business	2. Principal Place of Business 2a. Mailing Address			3. Date Organiz		3a. State of Formation	
Suite, Apt. #, etc.	Ite, Apt. #, etc. Suite, Apt. #, etc.			4. FEI Number		Applied	I For
City & State	y & State City & State			65-0	54981	Not Ap	plicable
Zip Country	Žip	Count	ry	3/1/5		SB 75 Additional Fee Requi	
7. Name and Address of Curr	ent Registered Agent		8. I Name	Name and Addres	s of New Regist	tered Agent/Office	
NEUMAN, HERB 11955 Sw 142 M. Am. F 9. Pursuant to the provisions of Sections 608.4 its registered office or registered agent, or both, it as registered agent, and accept the obligations	3 3 1 8 6 416 and 608.508, Florida S in the State of Florida. Such	Statutes, the al n change was a	Sulte, Apt. #, etc. City bove-named limited outhorized by affirma	liability company s	・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	424051- 5/98-01109-0 88.75 ****186 Zip Code ement for the purpose of characteristics appoints the appoints of the appoints	102 8.75
	pung Appointmont) (NOTE Regist				DATE		
10. Title Managing Members/Mana			ess Street Address		City,	, State and Zip Code	
M Neuman, Her	·b 11<		1142 ter		M A	n FI 3318 . F) 3318	
M Neuman, Scott 11955 50 M Adams, Joseph 11985 50		w 142 te w 142 to		14 / Aw	a, Fl 3318	36	