2001 UNIFORM BUSINESS REPORT (UBR) Check 219 DOCUMENT # L98000001384 1. Entity Name FILED MILLENNIUM MANAGEMENT GROUP_USA, L.C. 01 JAN 26 PM 3: 15 Principal Place of Business Mailing Address 4501 MANATEE AVENUE WEST. SUITE 142 4501 MANATEE AVENUE WEST. SUITE 142 SECRETARY OF STATE **BRADENTON FL 34209 BRADENTON FL 34209** TALEAHASSEE. FLORIDA 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0855196 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHAH, G Street Address (P.O. Box Number is Not Acceptable) MILLENNIUM MANAGEMENT GROUP USA, L.C. 4501 MANATEE AVENUE WEST, #142 **BRADENTON FL 34209** City Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE V-7-FILE NOW!!! FEE IS \$50.00 And to Make Check Payable to Department of State: 9. MANAGING MEMBERS/MEMBERS 10. ADDITIONS/CHANGES TITLE ☐ Delete MGR TITLE ☐ Change ☐ Addition NAME SHAH, ARCHANA NAME STREET ADDRESS STREET ADDRESS 4501 MANATEE AVENUE WEST, SUITE 142 CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** TITLE ☐ Delete TITLE ☐ Change? Addition MGR NAME NAME SHAH, JAY STREET ADDRESS STREET ADDRESS 4501 MANATEE AVENUE WEST, SUITE 142 CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL 34209 500003602766 - 6 -01/30/01--0日269-021^{Addition} TITLE Delete_ _ TITLE MGR -- . NAME NAME SHAH, ABHIJIT *****50.00 ****50.00 STREET ADDRESS STREET ADDRESS 4501 MANATEE AVENUE WEST, SUITE 142 CITY-ST-71P CITY-ST-ZIP **BRADENTON FL 34209** TITLE ☐ Delete TITLE 🔀 Addition ☐ Change MGR NAME NAME SHAH, G STREET ADDRESS STREET ADDRESS 4501 MANATEE AVENUE WEST, SUITE 142 City-ST-ZIP CITY-ST-ZIP BRADENTON FL 34209 TITLE ☐ Delete TITLE ☐ Addition Change NAME NAME STREET ACORESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIE TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

15 JANUARY 2001

941-798-9309