2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # L98000001722 00 MAY ~ 1 AM II: 23 1. Entity Name SALVAGE THE PLANET, LLC SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 1054 KANE CONCOURSE PO BOX 70643 BAY HARBOR ISLANDS FL 33154 OAKLAND PARK FL 33307-0643 2. Principal Place of Business 3. Mailing Address 275 COMMERCIAL Blud 2004 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State AUDERDATE BY THE SEA 65-0861109 Not Applicable Zip Country \$5.00 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SAWH, SALLY N Street Address (P.O. Box Number is Not Acceptable) 1054 KANE CONCOURSE **BAY HARBOR ISLANDS FL 33154** 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. 426 2000 FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State ADDITIONS/CHANGES MANAGING MEMBERS/MEMBERS 10. MGRM ☐ Addition ☐ Delete TITLE TITLE MGRM SALVAGE THE PLANET, INC. 274 FT. NAME SALVAGE THE PLANET, INC. NAME STREET ADDRESS STREET ADDRESS 1054 KANE CONCOURSE LANDERDALE BY THE SEA, FI. 33308 CITY-ST-ZIP CITY- ST- ZIP **BAY HARBOR ISLANDS FL 33154** MGRM TITLE ☐ Delete TITLE MGRM SY DOW, GILBERT MAMF NAME 275 COMMERCIAL Blub 2 F SYDOW, GILBERT STREET ADDRESS STREET ADDRESS 1054 KANE CONCOURSE LAUDERDALE BY THE SEA FI 33308 CITY- ST- ZIP CITY &T-ZIP **BAY HARBOR ISLANDS FL 33154** 400003256534 Addition TITLE Delete TITLE NAME NAME -05/18/00--01010--003 STREET ADDRESS STREET ADDRESS *****50.00 *****50.00 CITY-ST-7IP Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY- ST- ZIP CITY-ST-ZUP TITLE C Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition TEEF Defete TITLE NAME HAMF TREET ADDRESS STREET ADDRESS \$174-87-21P CITY - ST- TIP

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.

APPRUVEU

SIGNATURE:

1-26-00

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Daytime Phone #