FROM :HYPERLIGHT NETWORK CORPORATION FAX NO. :941 594-8371 Sep. 28 2001 03:16PM P2

SEP-28-2001 FRI 03:53 PM GIRARDIN BALDWIN DIBENED FAX NO. 941 262 7343 P. 03

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000002029
42

1. Entity Name

3MP, L.L.C.

Principal Place of Business	Mailing Address
255 COCOHATCHEE DRIVE NAPLES, FL 34110	same

100004623991--8
-10/05/01--01004--016
*****50.00 *****50.00

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number — Applied For [X] / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
STRONG, MARK 255 COCOHATCHEE DRIVE NAPLES, FL 34110	Name: Street Address (P.O. Box Number is Not Acceptable): City: FL Zip Code:

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:

[redacted]

9. Managers/Members		10. Additions/Changes	
Title / Name / Street Address / City-St-Zip	MGRM STRONG, MARK ☐ Delete	Title / Name / Street Address / City-St-Zip	255 COCOHATCHEE DRIVE, 34110 ☒ Change ☐ Addition
Title / Name / Street Address / City-St-Zip	MGRM WOLLINS, DAVID ☐ Delete	Title / Name / Street Address / City-St-Zip	255 COCOHATCHEE DRIVE, 34110 ☒ Change ☐ Addition
Title / Name / Street Address / City-St-Zip	MGRM PRIEST, MADISON ☐ Delete	Title / Name / Street Address / City-St-Zip	255 COCOHATCHEE DRIVE, 34110 ☒ Change ☐ Addition
Title / Name / Street Address / City-St-Zip	MGRM PRIEST, LINDA ☐ Delete	Title / Name / Street Address / City-St-Zip	255 COCOHATCHEE DRIVE, 34110 ☒ Change ☐ Addition
Title / Name / Street Address / City-St-Zip	☐ Delete	Title / Name / Street Address / City-St-Zip	☐ Change ☐ Addition
Title / Name / Street Address / City-St-Zip	☐ Delete	Title / Name / Street Address / City-St-Zip	☐ Change ☐ Addition

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.

1-941-254-0598

SIGNATURE: J. Mark Strong 9/28/01