LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State
05-13-2002 90106 006 ****50.00

DOCUMENT # L99000007508

1. Entity Name
QUANTUM COMMERCIAL LANDS, L.L.C.

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961245

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2500 Quantum Lakes Dr.	2500 Quantum Lakes Dr.
Suite, Apt. #, etc. Ste 101	Suite, Apt. #, etc. Ste 101
City & State Boynton Beach, FL	City & State Boynton Beach, FL
Zip 33426 Country US	Zip 33426 Country US

4. FEI Number 65-0999504 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: DAVID B. NORRIS

Street Address (P.O. Box Number is Not Acceptable): 712 U.S. Highway One, Ste 400

City: North Palm Beach, FL Zip Code: 33408

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable.

FEE IS $50.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR MACDONALD, DOUGLAS 2500 Quantum Lakes Dr, Suite 101 Boynton Beach, FL 33426
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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: Douglas MacDonald 561/740-2447
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #