FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jan 29, 2002 8:00 am DOCUMENT # L9900008005 **Secretary of State** 1. Entity Name 01-29-2002 90017 050 ****50.00 MURANO REALTY, LLC Principal Place of Business Mailing Address 1410 SUNSET HARBOUR DRIVE, SUITE 218 1410 SUNSET HARBOUR DRIVE, SUITE 218 MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 2. Principal Place of Business 3. Mailing Address 10185 P. Covul DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. # 160a City & State City & State 4. FEI Number Applied For 65-1017748 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 Name PHILIPS, DAVID ESQ. Street Address (P.O. Box Number is Not Acceptable) 757 WASHINGTON AVE. MIAMI BEACH FL 33139 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE-NOW!!!_FEE-IS-\$50.00-Make Check Payable to Department of State Due By May 1, 2002 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. MGR ☐ Addition TITLE Delete TITI F Change NAME NAME LERNER, VICTOR A STREET ADDRESS STREET ADDRESS 1410 SUNSET HARBOUR DRIVE, SUITE 218 CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33139 Delete □ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

SIGNATURE: OR AUTHORIZED REPRESENTATIV

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.