CR2E083 (9/01)

Mar 20, 2002 8:00 am

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M0100000200 **Secretary of State** 03-20-2002 90039 012 ****55.00 LIGHTSPEED AT BEACON TRADEPORT (PARCEL 7) LLC Principal Place of Business Mailing Address 300 HOLLYWOOD WAY 300 HOLLYWOOD WAY HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 52-2290221 Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired XX Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STOTZER, THEODORE R Street Address (P.O. Box Number is Not Acceptable) 300 HOLLYWOOD WAY HOLLYWOOD FL 33021 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. DATE 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. TITLE MGRM ☐ Change XXAddition TITLE ☐ Delete LightSpeed at Beacon Tradeport LLC NAME NAME STREET ADDRESS STREET ADDRESS 300 Hollywood Way CITY-ST-ZIP CITY-ST-ZIP Hollywood, Florida 33021 ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME 33 1 7 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 201 0-CITY-ST-ZIP 11. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

(954) 981-1000 March 15, ANAGING MENES, MANAGER OF AUTHORIZED REPRESENTATIVE Davtime Phone # SIGNATURE MY TYRED OF PRINTED NAME

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.

LIGHTSPEED AT BEACON TRADEPORT (PARCEL 7) LLC