LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State
05-01-2002 91553 013 ****50.00

DOCUMENT # M01000001116

1. Entity Name
KSK GROUP, LLC

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949289

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2. Principal Place of Business	3. Mailing Address
8901 N.W. 33rd Street	8901 N.W. 33rd Street
Suite, Apt. #, etc.: Suite 150	Suite, Apt. #, etc.: Suite 150
City & State: Miami, FL	City & State: Miami, FL
Zip: 33172 Country: U.S.A.	Zip: 33172 Country: U.S.A.

4. FEI Number: 65-1083993 ☐ 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: Miami Corporate Systems, Inc.

Street Address (P.O. Box Number is Not Acceptable): 283 Catalonia Avenue, 2nd Floor

City: Coral Gables FL Zip Code: 33134

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 Famulak, Dow 8901 N.W. 33 Street, Suite 150 Miami, FL 33172
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR Sultan, Carlos 8901 N.W. 33 Street, Suite 150 Miami, FL 33172
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR Dickens, Deborah 8901 N.W. 33 Street, Suite 150 Miami, FL 33172
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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: X _____ 4/19/02