FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jun 05, 2002 8:00 am Secretary of State DOCUMENT # M0100001961 1. Entity Name 06-05-2002 90419 014 ****50.00 -DHLIN INVESTMENTS, LLC Principal Place of Business Mailing Address 1189 CANDLER ROAD 1189 CANDLER ROAD CLEARWATER FL 33765-2304 CLEARWATER FL 33765-2304 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 02-0495067 Not Applicable Country Zip Zip \$5.00 Additional Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MERRIAM, RICHARD P Street Address (P.O. Box Number is Not Acceptable) 1189 CANDLER ROAD CLEARWATER FL 33765-2304 City Zip Code FL 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 ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. CR2E083 (9/01) **MGR** TITLE ☐ Change ☐ Addition Delete TITLE NAME NAMÉ MERRIAM, RICHARD P STREET ADDRESS STREET ADDRESS 1189 CANDLER ROAD CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33765-2304 ☐ Addition ☐ Change TITLE ☐ Delete TITI F 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 TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition 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:

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.