2007 LIMITED LIABILITY COMPANY

FILED
07 SEP 18 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M06000004246

1. Entity Name
BETSY ROSS OWNER HOLDING, LLC

Principal Place of Business
1841 BROADWAY, SUITE 1009
NEW YORK, NY 10023

Mailing Address
1841 BROADWAY, SUITE 1009
NEW YORK, NY 10023

09182007 REIN-LLC CR2E101 (1/07)

2. Principal Place of Business - No P O Box #
Suite, Apt #, etc
City & State
Zip
Country

3. Mailing Address
Suite, Apt #, etc
City & State
Zip
Country

4. FEI Number ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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. I am familiar with and accept the obligations of registered agent.

SIGNATURE ______________________ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After January 1, 2008, Fee will be $200.00

BK

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR BETSY ROSS INVESTORS, LLC 1841 BROADWAY, SUITE 1009 NEW YORK, NY 10023	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 900109597669
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2007	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	A.R.	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: BILLY JACOBS 9/18/07 286 206 1990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone

M06000004246

FLORIDA FILING & SEARCH SERVICES, INC.
P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Drive, Suite A Tallahassee, FL 32301
PHONE: (850) 216-0457; FAX: (850) 216-0460

DATE: 09-18-07

NAME: BETSY ROSS OWNER HOLDING, LLC

TYPE OF FILING: ANNUAL REPORT

COST: $50

RETURN:

BK

BK

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ACCOUNT: **FCA0000000015**

AUTHORIZATION: ABBIE/PAUL HODGE Abbie Hodge

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