2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000000922

Entity Name: H FIVE INVESTMENTS, LLC

FILED Jan 20, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

24605 CHICAGO STREET WATERLOO, NE 68069 US

Current Mailing Address: New Mailing Address:

24605 CHICAGO STREET 24605 CHICAGO ST.

WATERLOO, NE 68069 US WATERLOO, NE 68069 US

FEI Number: 26-2108614 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

NRAI SERVICES, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

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: 01/20/2012

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM

Name: HOFFMAN, LAWRENCE D MGRM Address: 24605 CHICAGO STREET City-St-Zip: WATERLOO, NE 68069 US

Title: MBRM

Name: HOFFMAN, CAROL A
Address: 24605 CHICAGO STREET
City-St-Zip: WATERLOO, NE 68069 US

Title: MBRM

Name: HOFFMAN, JACQUELINE M Address: 24605 CHICAGO STREET City-St-Zip: WATERLOO, NE 68069 US

Title: MBRM

Name: HOFFMAN, JENNIFER A Address: 24605 CHICAGO STREET City-St-Zip: WATERLOO, NE 68069 US

Title: MBRM

Name: HUNTER, CHRISTINE L Address: 24605 CHICAGO STREET City-St-Zip: WATERLOO, NE 68069 US

Title: NONE

Name: NONE, NONE N

Address: 24605 CHICAGO STREET
City-St-Zip: WATERLOO, NE 68069 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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 Statues.

SIGNATURE: LAWRENCE D. HOFFMAN MGRM 01/20/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date