LIMITED L ANI	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			- 1	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS			LN 3/5		
\$ 188.75		To: FLOI	RIDA DEPAR	TMEN	T OF STATE	98	MAR -	2 PM 12	48	
1. Name and l of Limited L	Malling Address liability Company	UMEN	T# _{M960}	0000	00398					
PÉC 402 √ SAN	1a. Principal Place of Business Address 402 WEST BROADWAY, SUITE 120 SAN DIEGO CA 92101									
2 Principal Place of Business 2a. Mali			ing Address			3. Date	Organize	ed or Qualified	3a, St	ate of Formation
Suite, Apt. #, etc. Suite			, Apt. #, etc.			10/ 4. FE	10/11/1996 CA			
City & State			City & State			33-0681830 Applied For Not Applicable				
Zip	Country Zip			Count	ry	5. Date of Last Report 6. C			I	ificate of Status Desired
	7. Name and Address of Curre	nt Registere	d Agent		8 Name		03/1! Address	of New Regi	stered Ag	ent/Office
1200 SC PLANTAT 9. Pursuant to its registered of	8, Florida Statute orida Such chan	Suite, Apt. #, etc City Florida Statutes, the above-named limited			P.O. Box Number is Not Acceptable) Zip Code FL d liability company submits this statement for the purpose of changing ative vote of a majority of the members. I hereby accept the appointment					
	gent, and accept the obligations.			-	·			DATE		, , , , , , , , , , , , , , , , , , , ,
(Registered Agent Accepting Appointment) (N 10. Title Managing Members/Managers			(NOTE: Registered Ag	OTE: Registered Agent agnature required when reinstating) Business Street Address			City, State and Zip Code			
MGRM MILLER, GARY J MGRM ZELLER, DAVID G			402 W. 402 W.	402 W. BROADWAY, S					EGO	CA
							30	0002 -03/0 ****)	449 9/98 188.79	98237 01003006 *****188.75

SIGNATURE AND TYPOOL HINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

SIGNATURE:

2/24/98 (419) 232-4568
Dete Destine Phone #