File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY FILED Katherine Harris ANNUAL REPORT Secretary of State 99 MAR 22 PM 12: 06 1999 **DIVISION OF CORPORATIONS** FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee SECHTALL TO STATE TALLACTER STRUCKEN Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 188.75 Name and Mailing Address
of Limited Liability Company **DOCUMENT # M98000000113** 1a. Principal Place of Business Address THE NOBLE COMPANIES, LLC STE 800 EAST TOWER ATLANTA FINANCIAL CENTE STE 800 EAST TOWER ATLANTA F 3343 PEACHTREE RD., N.E. 3343 PEACHTREE RD., N.E. ATLANTA GA 30326 ATLANTA GA 30326 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 02/02/1998 GA Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 58-2304473 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country SB 75 Additional Fee Required 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) CT CORPORATION SYSTEM C/O CT CORPORATION 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 Suite, Apt. #, etc. Zip Code City 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE . (Registered Agent Accepting Appointment) (NOTE Registered Agent signal ire required when reinstation) 10. Title Managing Members/Managers **Business Street Address** City. State and Zip Code MGR SHAH, MITESH B STE. 800 EAST TOWER 3343 P ATLANTA GA 11. Ido 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 annual report is true and a gourage with this right and 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 printists among the execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an apdress 3/6/99 UITESH SHADY MANAGERE (404)262-9660 SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER OF MANAGER Daytone Photo #

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