05-02-2003 90587 029 ****50.00

2003 LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # M98000001051

1. Entity Name

BADGER ACQUISITION OF ORLANDO LLC



Principal Place of Business Mailing Address 30067271 1717 DIXIE HWY 1209 ORANGE STREET WILMINGTON DE 19801 SUITE 800 FT WRIGHT KY 41011 2. Principal Place of Business 3. Mailing Address 100 E. Rivercenter Blvd :____Suite" Apt."#,"etc. • 🔾 CHECK! HERE IF MAKING! CHANGES Suite, Apt: #, etc. 資 令 (達 3 75 Ste. 1600 Applied For City & State City & State 4. FEI Number 52-2119896 ovingtor Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS-\$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. **MGRM** ☐ Addition TITLE ☐ Delete ☐ Change NAME BADGER ACQUISITION LLC NAME STREET ADDRESS 1717 DIXIE HWY SUITE 800 STREET ADDRESS CITY-ST-ZIP FT WRIGHT KY CITY-ST-ZIP TITLE MGR ☐ Delete TITLE ☐ Change ☐ Addition FINN, TRACY NAME NAME STREET ADDRESS STREET ADDRESS 100 EAST RIVER CENTER BLVD., SUITE 1500 CITY-ST-ZIP CITY-ST-ZIP **COVINGTON KY 41011** MGR TITLE ☐ Delete TITLE ☐ Change Addition ABBOTT, BRADLEY S NAME NAME STREET ADDRESS STREET ADDRESS 1717 DIXIE HWY SUITE 800 CITY-ST-ZIP CITY-ST-ZIP FT WRIGHT KY MGR TITLE TITLE ☐ Delete Change ☐ Addition ROBBINS, REGIS NAME NAME STREET ADDRESS STREET ADDRESS 100 EAST RIVER CENTER BLVD., SUITE 1500 CITY-ST-ZIP CITY-ST-ZIP COVINGTON KY 41011 TITI F MGR TITLE ☐ Delete ☐ Change ☐ Addition MARSH, THOMAS R NAME NAME STREET ADDRESS 1717 DIXIE HWY SUITE 800 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT WRIGHT KY TITI F Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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.