

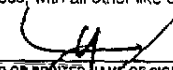


**FILED**  
**May 04, 2005 08:00 AM**  
**Secretary of State**

|   |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
|---|---|---|---|------|----------------|-------------|-------|--|------|----------------|-------------|-------|--|------|----------------|-------------|-------|--|------|----------------|-------------|-------|--|------|----------------|-------------|-------|--|------|----------------|-------------|--|--|
| <div style="display: flex; justify-content: space-between;"><div>DOCUMENT # P01000008110</div><div style="text-align: right;">Secretary of State</div></div> <div>1. Entity Name<br/>LOLO MANAGEMENT, INC.</div>  |   |    |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| Principal Place of Business<br>210 S VICTORIA PARK RD<br>FORT LAUDERDALE, FL 33304 US   |   | Mailing Address<br>210 S VICTORIA PARK RD<br>FORT LAUDERDALE, FL 33304 US   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| <b>DO NOT WRITE IN THIS SPACE</b>   |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
|   |   | <br>04252005 No Chg-P CR2E034 (10/03)  |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
|   |   | <div>4. FEI Number<br/>59-3692081</div> <div>Applied For<br/>Not Applicable</div>   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
|   |   | <div>5. Certificate of Status Desired <input type="checkbox"/></div> <div>\$8.75 Additional<br/>Fee Required</div>  |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| 6. Name and Address of Current Registered Agent<br><br>HAYNE, JOHN JR<br>210 S VICTORIA PARK RD<br>FORT LAUDERDALE, FL 33304  |   | <b>DO NOT WRITE<br/>IN THIS SPACE</b>   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| <div>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.</div> <div style="display: flex; justify-content: space-between;"><div>SIGNATURE _____<br/><small>Signature, typed or printed name of registered agent and title if applicable.</small></div><div>(NOTE: Registered Agent signature required when reinstating)</div><div>DATE _____</div></div>  |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2005 Fee will be \$550.00</b>   |   | <div>9. Election Campaign Financing<br/>Trust Fund Contribution. <input type="checkbox"/></div> <div>\$5.00 May Be<br/>Added to Fees</div>                                |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| 10. OFFICERS AND DIRECTORS  |   | <div>U00000362293<br/>05/05/05-80108-022 150.00</div> <div style="height: 150px; text-align: center; vertical-align: middle;"><b>DO NOT WRITE<br/>IN THIS SPACE</b></div> |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| <table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:20%;">TITLE</td><td rowspan="4">D<br/>HAYNIE, JOHN JR<br/>210 S VICTORIA PARK RD<br/>FORT LAUDERDALE, FL 33304</td></tr><tr><td>NAME</td></tr><tr><td>STREET ADDRESS</td></tr><tr><td>CITY-ST-ZIP</td></tr><tr><td>TITLE</td><td rowspan="4"></td></tr><tr><td>NAME</td></tr><tr><td>STREET ADDRESS</td></tr><tr><td>CITY-ST-ZIP</td></tr><tr><td>TITLE</td><td rowspan="4"></td></tr><tr><td>NAME</td></tr><tr><td>STREET ADDRESS</td></tr><tr><td>CITY-ST-ZIP</td></tr><tr><td>TITLE</td><td rowspan="4"></td></tr><tr><td>NAME</td></tr><tr><td>STREET ADDRESS</td></tr><tr><td>CITY-ST-ZIP</td></tr><tr><td>TITLE</td><td rowspan="4"></td></tr><tr><td>NAME</td></tr><tr><td>STREET ADDRESS</td></tr><tr><td>CITY-ST-ZIP</td></tr><tr><td>TITLE</td><td rowspan="4"></td></tr><tr><td>NAME</td></tr><tr><td>STREET ADDRESS</td></tr><tr><td>CITY-ST-ZIP</td></tr></table>  |   | TITLE   | D<br>HAYNIE, JOHN JR<br>210 S VICTORIA PARK RD<br>FORT LAUDERDALE, FL 33304 | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE |  | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE |  | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE |  | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE |  | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE |  | NAME | STREET ADDRESS | CITY-ST-ZIP |  |  |
| TITLE   | D<br>HAYNIE, JOHN JR<br>210 S VICTORIA PARK RD<br>FORT LAUDERDALE, FL 33304 |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| NAME  |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| STREET ADDRESS  |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| CITY-ST-ZIP   |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| TITLE   |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| NAME  |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| STREET ADDRESS  |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| CITY-ST-ZIP   |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| TITLE   |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| NAME  |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| STREET ADDRESS  |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| CITY-ST-ZIP   |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| TITLE   |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| NAME  |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| STREET ADDRESS  |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| CITY-ST-ZIP   |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| TITLE   |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| NAME  |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| STREET ADDRESS  |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| CITY-ST-ZIP   |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| TITLE   |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| NAME  |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| STREET ADDRESS  |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| CITY-ST-ZIP   |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |
| <div>12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</div> <div style="display: flex; justify-content: space-between;"><div>SIGNATURE:  <b>JOHN R. HAYNIE, JR.</b></div><div>Date <b>7.27.05</b></div><div>Daytime Phone # <b>954.770.3818</b></div></div> <div style="text-align: center; font-size: small;">SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</div> |   |   |   |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |       |  |      |                |             |  |  |