I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L16000056666 Entity Name: PRODUCT INVESTMENT GROUP LLC

Current Principal Place of Business:

16136 VIA MONTEVERDE DELRAY BEACH. FL 33446

Current Mailing Address:

16136 VIA MONTEVERDE DELRAY BEACH. FL 33446

FEI Number: 81-1931375

Name and Address of Current Registered Agent:

KLEIN, STEVEN C 2300 NW CORPORATE BLVD SUITE 112 BOCA RATON, FL 33431 US

FILED Apr 30, 2019 Secretary of State 0672251895CC

Certificate of Status Desired: No

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:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MMBR	Title	MMBR
Name	RE PARTNERS 2B, LLC	Name	FOKAS ASSET SERVICES, LLC
Address	90 ALMERIA AVE SUITE 204	Address	16136 VIA MONTEVERDE
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	DELRAY BEACH FL 33446

SIGNATURE: SCOTT SAKOFF MMBR

04/30/2019

Date

Date

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT