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|--|-----------------|---|------------|---|---------|------------------|--|
| No. W 112415 | | Due no later than Mar 31, 2013 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. TGM MGT I, LLC ROBERT W DAVIS 125 SW 3RD PLACE SUITE 300 CAPE CORAL FL 33991 USA | | REGISTERED AGENT SOLUTIONS INC 921 S ORCHARD ST STE G BOISE ID 83705 USA | | | |
| | | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | DAVID R BRANTON | 125 SW 3RD PLACE, SUITE 300 | CAPE CORAL | FL | USA | 33991 | |
| MEMBER | TODD S FEELEY | 125 SW 3RD PLACE, SUITE 300 | CAPE CORAL | FL | USA | 33991 | |
| MEMBER | ROBERT W DAVIS | 125 SW 3RD PLACE, SUITE 300 | CAPE CORAL | FL | USA | 33991 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| FL W 112415 | | Signature: Robert W Davis | | | | Date: 01/30/2013 | |
| | | Name (type or print): Robert W Davis | | | | Title: Member | |
| Processed 01/30/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |