2002 UNIFORM BUSINESS REPORT (UBR)

FILED Aug 13, 2002 8:00 am

DOCUMENT # L0100005901							07-31-2002 90106 001 ****50.00			
KOHL	J SILK, L.L.	C.			/					
Principal Pl	lace of Business	\$	Mailing Address		<u> </u>					
4039 CHICORA WOOD PLACE JACKSONVILLE FL 32224 4039 CHICORA WOOD PLACE JACKSONVILLE FL 32224										
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2. Principal Place of Business 4039 Chicota Wood Pl. Suite, Apt. #, etc. Suite, Apt. #, etc.					ine					
							DO NOT WRITE IN	THIS SPACE		
City & State City & State City & State Zip Country Zip					<u> </u>		Number -371-55-62	— —	Applied For Not Applicable	8
322		Zip egistered Agent	Country		1	tificate of Status Desired	Fee Requ	dditional ired		
<u> </u>		HIN THE SAME OF STREET	Official Wilding		Name	7. Narr	to and Address of New Registe	red Agent		
ELEFANT, FRED 1650 PRUDENTIAL DR., STE 105					Street Address (Number is Not Acceptable)			-
JA	ACKSONVILLE	. FL 32207			City			7in Co		1
R. The abov	e named entity	as benite this statement for	4		-	•		FL Zip Co	de	
G III MILLO	a version energ	SODUMES THIS STREETHAND FOR F	he purpose of changing its	registere	d office or regisl	lered agent,	or both, in the State of Florida.			
SIGNATURE	Signature, typed c	r printed name of registered agent and	title if applicable. (NOTE	Recistered	Agent elgnature requi	والمرازي ومطور المعا	<u> </u>			
			<u>`</u>		EE IS \$50.00		ing) UA	ATE		4_
Make Check Pay					Department	of State				
			Due) By Ma	y 1, 2002					1
9.	MGR	MANAGING MEMBERS/MANAGERS					L			1
NAME				10.			ADDITIONS/CHANG			1_
	SINGH, A	RDENA S	☐ Delete	10. TITLE NAME	ľ		ADDITIONS/CHANG	GES Change	☐ Addition	(9/01)
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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 cath: that I am a managing member or manager of the limited liability company or the receiver or trustee employeed to execute the report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF BIGHTING MANAGING MANAGER, OR AUTHORIZED REPRESENTATIVE

7-29-02