

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

FILED
May 24, 2002 8:00 am
Secretary of State

04-22-2002 90154 009 ****55.00

DOCUMENT # **101000008525** ✓

1. Entity Name

DALEE ENTERPRISES, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4851 W Gandy Blvd

3. Mailing Address

PO Box 130111

Suite, Apt. #, etc.

7-40

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Tampa, FL

City & State

Tampa, FL

4. FEI Number

59-372-7821

Applied For

Not Applicable

Zip

33611

Country

USA

Zip

33681-0111

Country

USA

5. Certificate of Status Desired

☒

**\$5.00 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Lawrence E. Dailey Jr.

Street Address (P.O. Box Number is Not Acceptable)

4819 College Court #10B

City

Tampa

FL

Zip Code

33617

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**Managing Member
Lawrence E. Dailey Jr.
4819 College Ct #10B
Tampa, FL 33617**

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
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: **[Signature]**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

LAWRENCE E. DAILEY JR

Date

11 Apr 02

Daytime Phone #

813-216-1005

CR2E083B (12/01)