

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

FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90007 009 ****55.00

DOCUMENT # L01000021894

1. Entity Name

NIEDERLEHNER AND SEITZ, ATTORNEYS AT LAW, P.L.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

209 S. Baylen St.

3. Mailing Address

209 S. Baylen St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Pensacola FL

City & State

Pensacola FL

4. FEI Number

02-0535989

Applied For

Not Applicable

Zip

32501

Country

Zip

32501

Country

5. Certificate of Status Desired

☒

**\$5.00 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Erich M. Niederlehner

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

~~701 N. State St.~~ 209 S. Baylen St.

City

~~Pensacola~~ Pensacola

FL

Zip Code

~~32501~~ 32501

**DO NOT WRITE
IN THIS SPACE**

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.

Erich M. Niederlehner

3/19/02

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME Erich M. Niederlehner
STREET ADDRESS 209 S. Baylen St.
CITY-ST-ZIP Pensacola, FL 32501

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM
NAME Edward G. Seitz, Jr.
STREET ADDRESS 209 S. Baylen St.
CITY-ST-ZIP Pensacola, FL 32501

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

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

Erich M. Niederlehner

3/19/02

Date

(850) 433-2332

Daytime Phone #

CR2E083B (12/01)