Amended

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

APPROVED AND FILED

07-28-2002 90171 012 ****50.00
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # L96000000440

1. Entity Name
Basik Development, LLC

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
720 Goodlette Rd	720 Goodlette Rd
Suite, Apt. #, etc. Ste. 305	Suite, Apt. #, etc. Ste 305
City & State Naples, FL	City & State Naples, FL
Zip 34102 Country	Zip 34102 Country

4. FEI Number 65-0594317 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Keith Basik

Street Address (P.O. Box Number is Not Acceptable): 720 Goodlette Rd, Ste 305

City: Naples FL Zip Code 34102

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]
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	MGRM	TITLE	
NAME	Keith Basik	NAME	
STREET ADDRESS	1100 Royal Palm Dr	STREET ADDRESS	
CITY-ST-ZIP	Naples, FL 34103	CITY-ST-ZIP	
TITLE	MGRM	TITLE	
NAME	Jeffrey Basik	NAME	
STREET ADDRESS	7870 Eagles Flight Lane	STREET ADDRESS	
CITY-ST-ZIP	FT. Myers, FL 33912	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	DO NOT WRITE IN THIS SPACE
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CR2E083B (12/01)

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] Keith Basik 7/22/02 239-262-4622
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #