

# 2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

00 MAY -1 PM 4:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## DOCUMENT #

L00000000211

1. Entity Name

HAPPY LANDINGS USA, LLC.

Principal Place of Business

Mailing Address

2. Principal Place of Business

1295 SW BILTMORE St.

3. Mailing Address

2295 SE Glasgow Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Port St Lucie, FL

City & State

Stuart, FL

4. FEI Number

65-0977758

Applied For

Not Applicable

Zip

34983

Country

Zip

34997

Country

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

### 6. Name and Address of Current Registered Agent

### 7. Name and Address of New Registered Agent

KATHERINE E. BADAME

2995 SE Glasgow Dr

Stuart, FL 34997

Name

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

City

FL

Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**

100003256641--5

-05/18/00--01012--012

\*\*\*\*\*50.00 \*\*\*\*\*50.00

### 9. MANAGING MEMBERS/MEMBERS

### 10. ADDITIONS/CHANGES

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

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:

*Richard Badame*

*Managing Director*

Date

Daytime Phone #

561-  
219-0210

CR2E083 (11/99)