

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

FILED
Mar 29, 2002 8:00 am
Secretary of State

03-29-2002 90598 034 *****50.00

DOCUMENT # L00000001191

1. Entity Name

GROUP D, L.L.C.

DO NOT WRITE IN THIS SPACE

934466

2. Principal Place of Business
1710 Middle Gulf Drive

Suite, Apt. #, etc.

3. Mailing Address
7587 Equitable Drive

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Sanibel, FL

City & State
Eden Prairie, MN

4. FEI Number
41-1961543

Applied For
Not Applicable

Zip
33957

Country
USA

Zip
55344

Country
USA

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
Byron Frank

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

1710 Middle Gulf Drive

City Sanibel FL Zip Code 33957

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
MGRM
Theodore Deikel
7587 Equitable Drive
Eden Prairie, MN 55344

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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:

Theodore Deikel

3/18/02

952-975-4813

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

Date

Daytime Phone #

CR2E083B (12/01)