FILED Jan 14, 2002 8:00 am

CITY-ST-ZIP 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.

TITLE

NAME

☐ Delete

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE

CITY-ST-ZIP ¥

STREET ADDRESS

TITLE

NAME

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