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

Apr 30, 2002 8:00 am Secretary of State DOCUMENT # 04-30-2002 90007 031 ****50 00 RATHILL, LIC 945920 DO NOT WRITE IN THIS SPACE Principal Place of Business Mailing Address 11 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State SARAS 074 City & State FL ٦L 1005973 SPRAJOTA Not Applicable Country PLU \$5.00 Additional Country NSA JESTE. 5. Certificate of Status Desired 5423¢ Fee Required : 7. Name and Address of Current Registered Agent Name Richard RATHER DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE City SARAJOTA ent for the purpose of changing its registered office or registered agent, or both; in the State of Florida. Richard 6. RATHER SIGNATI FEE IS \$50.00 Make Check Payable to Department of State DUE BY MAY 1 MANAGING MEMBERS/MANAGERS 9. TILE * * * NAME. NAME RICHARD 6 RATHER STREET ADDRESS 900 WHITAKER LN SARASOTA, FL 34236 STREET ADDRESS SARASOTA, FL CITY ST ZP CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME: NAME. STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE mu. TITLE NAME NAME STREET ADDRESS CIDELL ADODESS CITY ST ZP CITY - ST - ZIP me a s TITLE NAME STREET ADORESS STREET ADDRESS CITY ST ZIP CITY - ST - ZIP BUL TITLE NAME ? NAME STREET ADDRESS STREET ADDRESS CITY ST. AP :: CITY-ST-ZIP 11. Libereby certify that the information supplied with this lifting 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 combany of the feceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. RICHARD G. RATIUM

FILED

Daytime Phone #