

05/12/02 - 90587 009  
\$50.00

DOCUMENT # L00000002250

1. Entity Name

KELLER IRONWORKS, L.L.C.

Principal Place of Business

10625 GRANT ST.  
CHISAGO CITY MN 55013

Mailing Address

10625 GRANT ST.  
CHISAGO CITY MN 55013

FILED

2003 JAN 29 AM 10:05

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

56-2287225

APPLIED FOR

Applied For

Not Applied

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

JACKMAN, JAMES D ESQ.  
4608 26TH ST. W.  
BRADENTON FL 34207

7. Name and Address of New Registered Agent

Name

Daniel W. Wychor

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

214 116th St. East

City

Bradenton

FL

Zip Code

34212

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

DANIEL W. WYCHOR

Signature, typed or printed name of registered agent and title if applicable

*Daniel W. Wychor*

(NOTE: Registered Agent signature required when reinstating)

11/13/02

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State  
Due By May 1, 2002

900011783509

02/04/03--01059--001 \*\*50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KELLER, TOM 10625 GRANT ST. CHISAGO CITY MN 55013	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KELLER, BETH 10625 GRANT ST. CHISAGO CITY MN 55013	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10.

ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Add
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Add

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]*

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

651-213  
4/24/02  
1124

Date

Daytime Phone #

FILED

2003 JAN 29 AM 10:05

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**KELLER IRONWORKS, L.L.C.  
10625 GRANT STREET  
CHICAGO CITY, MN 55013**

January 22, 2003.

Mr. Joey Bryan  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

RE: Limited Liability Company Uniform Business Report

Dear Mr. Bryan:

Per your telephone conversation with our CPA's office, enclosed please the 2002 Limited Liability Company Uniform Business Report for Keller Ironworks, LLC. Please note that the FEI Number has been completed and the Registered Officer has signed the form. Also enclosed is a check in the amount of \$50.00, which represents the 2003 Annual Fee.

We respectfully request that you accept the \$50 fee and reinstate Keller Ironworks, LLC. Thank you for your assistance.

Sincerely,



Beth Keller

Enclosures

Certified Mail 7002 0860 0003 2194 8099