

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

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90406 035 ***150.00

DOCUMENT # L000000004390

1. Entity Name

PAVI, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3776 NW 9th St.

Suite, Apt. #, etc.

3. Mailing Address

3776 NW 9th St.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Delray Beach, FL

City & State
Delray Beach, FL

4. FEI Number
NONE

Applied For
Not Applicable

Zip
33445

Country
USA

Zip
33445

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
ALFRED PAVIA

Street Address (P.O. Box Number is Not Acceptable)
3776 NW 9th Street

City
Delray Beach

FL

Zip Code
33445

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

MGR.
PAVIA, ALFRED
3776 NW 9th St., Delray Bch, FL 33445

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

MGR.
PAVIA, LYNN
3776 NW 9th St., Delray Bch, FL 33445

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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**DO NOT WRITE
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:

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

ALFRED PAVIA

Date

5/15/02

Daytime Phone #

56-498-0806

CR2E083B (12/01)

Pavi, LLC

3776 NW 9th Street, Delray Beach, FL 33445

Phone: 561-498-0806

Fax: 561-498-1803

Attachment

967915

May 14, 2002

HL00000004390

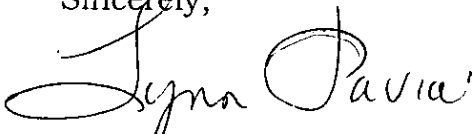
Division of Corporations
PO Box 6478
Tallahassee, FL 32314

Re: 2002 UBR
Pavi, LLC

To Whom It May Concern:

Enclosed herewith find a duplicate UBR 2002 for Pavi, LLC as I am told the original form, sent in over two weeks ago with my check for \$50, has not been received. I am now including the late amount of \$150, but hope you will reconsider the amount due as the original was sent in timely. I cannot determine why you have not received it at this time. I have had some problems with my mail and I have already filed a complaint with the post office. In the event the original shows up at a later date I trust you will return it to me.

Sincerely,


Lynn Pavia