2001	UNIFORM	BUSINESS	REPORT	(UBR)
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DOCUMENT # L0000004631 PRIVATE CLUB LINKS FORM, LLC							FI	LE	D H 3:	" W Z 1	121	NO9 AF			
Principal Place of Business Mailing Address							10	FED	<u> </u>	ne ci	ATF				
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2. Principal P			3.	Mailing Address				1						# (%## (%#)	
Suite, Apt. #, etc. Suite, A		Suite, Apt. #, etc.	- 5ane -		DO NOT WRITE IN THIS SPACE										
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Zip		Country		Zip Country		ntry		5. Certifi	cate of St				\$5.00 Ad	ditional	1
6. Name and Address of Current Registered Agent				L	<u> </u>		7. Name	and Add	ress of I	New Reg	istered	<u>-</u>		-	
						Name	- Sa	me -		•					7
GOULET, ROBERT L					Street Address (P.O. Box Number is Not Acceptable)							1			
		BLVD., SUITE 23!	5			<u> </u>		: _			_ _ _				┨
ORLANDO FL 32819				City	FL Zip Code						le	$\left\{ \right.$			
8. The above named entity submits this statement for the purpose of changing its registe					register	ad office or	r registere	d agent o	both in	the State	of Floric				-
o. me above	named emity	y southing this state	ment for the p	surpose of changing its	register	ea onice of	r registere	a agom, o	DOM, III	ino otate	, 01 1 ,0110	1 0,			
SIGNATURE .	Signature, typed	or printed name of register	ed agent and title	if applicable. (NOT	E: Registere	d Agent signati	ure required v	vhen reinstating	<u> </u>			DATE			{
			 -	EU E M	OW III						_				1
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State															
9.	 	MANAGING	MEMPERS/I	MEMBERS	10.		· · · · · · · · · · · · · · · · · · ·	Mes	aziko		IONS/C	HANGES			1_
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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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes.															
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Described Date Date Date Date Date Date Date Date															