

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

**FILED**  
**Jul 17, 2002 8:00 am**  
**Secretary of State**

07-17-2002 90140 004 \*\*\*150.00

DOCUMENT # L00000005136

1. Entity Name

CLUSTER & CLUSTER LLC

**DO NOT WRITE IN THIS SPACE**

970615

2. Principal Place of Business

8875 Hidden River Parkway Suite 300

3. Mailing Address

18805 Duquesne Drive

Suite, Apt. #, etc.

Attn: Mark Hankins

Suite, Apt. #, etc.

Attn: Mark Hankins

City & State

City & State

Tampa, FL

Tampa, FL

Zip

33637

Country

USA

Zip

33647

Country

USA

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name Florida Incorporators, Inc.

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

8875 Hidden River Parkway

Suite 300

City

Tampa

FL

Zip Code

33637

**DO NOT WRITE  
IN THIS SPACE**

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

Mark Hankins, President

07/09/2002

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  
MANAGER  
GERLINDE TATRAI  
LANDSTR. 142  
SCHAAN, FL-9494, LIECHTENSTEIN

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**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)(f), 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:



GERLINDE TATRAI, Manager

07/09/2002

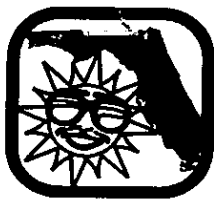
888-352-2677

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

Date

Signature Number

CR2E083B (12/01)



Attachment  
970615  
L 00000005136

## Florida Incorporators, Inc.

Mark S. Hankins  
President  
8875 Hidden River Parkway, Suite 300  
Tampa, FL 33637-2087

July 11, 2002

Florida Department of State  
Division of Corporations  
Certifications Section  
P.O. Box 6327  
Tallahassee, Florida 32314

**RE: Yorkstar Financial Services, LLC**

Dear Corporate Specialist:

Enclosed are UBR forms for Yorkstar Financial Services, LLC, Times International, LLC, Smart TV Products, LLC, Neco Associates, LLC, MIC LLC, and Cluster & Cluster, LLC, and funds representing the filing fees for same.

I want to draw your attention to Yorkstar, because I have enclosed a return overnight pouch for its good standing certificate, which is the only one requested. Please provide said certificate as soon as possible. The Portofino Interiors, Inc. filing which is also included in this package can be returned in the ordinary course of business, and should not be allowed to delay the return of the Yorkstar certification. Thank you.

Please do not hesitate to contact the undersigned if there are any questions or concerns.

Sincerely,

Mark Hankins  
President