2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000005580

1. Entity Name

FJK MANAGEMENT, LLC

10/4/02

FILED
02 DEC -5 AM 8: 56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
230 ROYAL PALM WAY PALM BEACH FL 33480	230 ROYAL PALM WAY PALM BEACH FL 33480

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 **APPLIED FOR** 01-0656774

Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	**7.** Name and Address of New Registered Agent
KEITEL, FREDERICK J III 230 ROYAL PALM WAY STE. 401 PALM BEACH FL 33480	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State
Due By September 25, 2002

r000093777747
12/05/02--01065--001 **$50.00

9. MANAGING MEMBERS / MANAGERS		**10.**	ADDITIONS / CHANGES
TITLE **MGRM** NAME **KEITEL, FREDERICK J III** STREET ADDRESS **230 ROYAL PALM WAY, STE. 401** CITY-ST-ZIP **PALM BEACH FL 33480**	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 4/30/02 90005 033 $50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E083 (4/02)

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: Frederick J Keitel IV=MGRM   8/24/02 561 310 6864

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #