

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State

01-15-2002 90035 038 *****50.00

DOCUMENT # L00000008215

1. Entity Name

GLOBAL PACKAGING INNOVATIONS, L.L.C.

Principal Place of Business

550 PONTE VEDRA BLVD.
PONTE VEDRA FL 32082

Mailing Address

102 SURREY LANE
PONTE VEDRA FL 32082

13590

2. Principal Place of Business

102 SURREY LANE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PONTE VEDRA BEACH, FL

City & State

4. FEI Number

23-2967915

Applied For

Not Applicable

Zip

32082

Country

USA

Zip

Country

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

6. Name and Address of Current Registered Agent

LANGHAM, DAVID W.

LANGHAM & LANGHAM, P.A.

13000 SAWGRASS VILLAGE CIRCLE, SUITE 28

PONTE VEDRA FL 32082

7. Name and Address of New Registered Agent

Name

BARON L. BARTLETT, BARTLETT & DEAL, P.A.

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

135 PROFESSIONAL DRIVE

SUITE 101

City

PONTE VEDRA BEACH

FL

Zip Code

32082

8. The above named agent submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature of agent or name of agent if not applicable

(NOTE: Registered Agent signature required when releasing)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM	<input type="checkbox"/> Delete
NAME	NIEMIEC, MARK A	
STREET ADDRESS	102 SURREY LANE	
CITY-ST-ZIP	PONTE VEDRA FL 32082	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	NIEMIEC, FRANCES W	
STREET ADDRESS	102 SURREY LANE	
CITY-ST-ZIP	PONTE VEDRA FL 32082	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE	MGRM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NIEMIEC, MARK A	
STREET ADDRESS	102 SURREY LANE	
CITY-ST-ZIP	PONTE VEDRA, FL 32082	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 60B, Florida Statutes.

SIGNATURE

MARK A NIEMIEC

11/8/02

904-5437945

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

Date

Daytime Phone #

CR2E083 (9/01)