

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

FILED
Apr 25, 2002 8:00 am
Secretary of State

04-25-2002 90011 033 ****50.00

DOCUMENT # L00000009082

1. Entity Name

FEDERAL BOOKS, LLC

DO NOT WRITE IN THIS SPACE

945718

2. Principal Place of Business

18340 Ventura Blvd.

Suite, Apt. #, etc.

Ste. 230

City & State

Tarzana, CA

3. Mailing Address

Same

Suite, Apt. #, etc.

City & State

4. FEI Number

58-2561327

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

Zip
91356

Country
USA

Zip

Country

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Luke Lirot, Esq.

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

112 East Street, #B

City

Tampa

FL

Zip Code

33602

**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

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

Member

Donald Browning

5921 JuliaH Lane

Tarzana, CA 91316

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Member

Everett Farr

309 Camer

Densalem, PA 19020

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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)(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

Donald Browning 4/18/02(818) 757-3396

Date

Daytime Phone #

CR2E0638 (12/01)