LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

L00000010923

DOCUMENT #

FILED Apr 01, 2002 8:00 am Secretary of State

,		04-01-2002 90727	
DANIEL A. KOREY & ASSOCIATES, L.C.			
DO NOT WRITE IN THIS SPACE		B0054624	
2. Principal Place of Business 3. Mailing Address			
9468 A Clair Ranch Rd. Same			
Suite, Apt. #, etc. Suite, Apt. #, etc.		DO NOT WRITE IN TH	IS SPACE
City & State City & State	 	4 FFINIsphas	
3 3 4 3 7		4. FEI Number 65-(033399	Applied For Not Applicable
Zip Country Zip	Country 5.	5. Certificate of Status Desired	\$5.00 Additional Fee Required
•		7. Name and Address of Current Registe	red Agent
DO NOT WRITE	Name C.	SLEL AKOVEY & asso	c. L.C.
DO NOT WRITE Street Address		(P.QBox Number is Not Acceptable)	
IN THIS SPACE	7 7 68	Sec Clair Rawen	KC.
114 11110 0171012	150gn	tow Busch	
	City 0	F	L 33437
3. The above named entity submits this statement for the pyrpose of changing	its registered office or regis	·	<u> </u>
. The above marked charge is a state from the payoble of charging	its registered office of regis	stered agent, or both, in the state of Fronda.	_
SIGNATURE / June 71. Comp		3/2//0	7
Signature, typed or printed name of registered agent and title if applicable.		DATI	
V	FEE IS \$50.00		
Make Check I	Payable to Department	t of State	
	DUE BY MAY 1		
MANAGING MEMBERS/MANAGERS			
ITLE MENAGER MEMBER AME DANIEZ A Korey	TITLE		
IREET ADDRESS GUGS EL CLA in CANAL Rd.	NAME STREET ADDRESS		
TREET ADDRESS 9468 EL Clair RANCL Rd. By HON DEACH Fla. 33437	CITY-ST-ZIP		
me ntember .	TITLE		
AME KAthryn Kover	NAME		
TREET ADDRESS 9468 Et Clair Ronch Rd.	STREET ADDRESS		
MY-ST-ZIP Boy w ton Beach Fla. 33437	CITY-ST-ZIP		
ITLE V	TITLE .	,	
AME Treet address	NAME STREET ADDRESS		
ITY-ST-ZIP	CITY-ST-ZIP	DO NOT WR	ITE
TLE	TITLE		
AME	NAME	IN THIS SPA	CE
TREET ADDRESS	STREET ADDRESS		
ITY-ST-ZIP	CITY-ST-ZIP		
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AME .	NAME STREET ADDRESS		
'REET ADDRESS !			
TREET ADDRESS TY-ST-ZIP	CITY-ST-ZIP		
TY-ST-ZIP	TITLE NAME		
TY-ST-ZIP TLE	TITLE		•

SIGNATURE: DANIEL A. Korey Law A Joy 3/21/02 561-733-1182

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

Date

Date

Date

Daving Phone #