

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

**FILED**  
**Apr 02, 2002 8:00 am**  
**Secretary of State**

04-02-2002 90756 001 \*\*\*200.00

DOCUMENT # L00000012689

1. Entity Name

T & K Delray LLC  
398 NE 6th Ave.  
Delray Beach FL 33483

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

3. Mailing Address

please note address change

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

651052049

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Corpdirect Agents

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

103 N Meridian St. Lower Level

City

Tallahassee FL

FL

Zip Code  
32301

**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

Rickard, Kevin  
398 NE 6th Ave.  
Delray Beach FL 33483

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

please note change of address

TITLE  
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CITY - ST - ZIP

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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

Date

Daytime Phone #

CR2E083B (12/01)