## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #- L00000013654

1. Entity Name

**FILED** Apr 22, 2002 8:00 am Secretary of State

04-22-2002 90234 014 \*\*\*\*50.00

R2E083B (12/01)

Bad Moon Rising, LLC, a Florida limited liability company										
DO NOT WRITE IN THIS SPACE									<b>.</b>	<b></b>
2. Principal Place of Business 500 S. Florida Avenue  3. Mailing Address 500 S. Flori				ida A	lda Avenue					
Suite, Apt. #, etc. Suite, Apt.								DO NOT WRITE IN THIS	SPACE	
City & Sta	ate .	Suite 800 City & State	ity & State			4. FEI Number Applied For				
Lakeland, FI. Zip Country		Country	Lakeland, FI. Zip Country					90355		Not Applicable
33801	33801 USA		33801	USA			5. Certificate of Status Desired 55.00 Additional Fee Required			
					Name			and Address of Current Registered	Agent	
DO NOT WRITE					Street	Name Ronald L. Clark  Street Address (P.O. Box Number is Not Acceptable)				
IN THIS SPACE					500 S. Florida Avenue, Suite 800					
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a. The above	e named entity sur	Jinits this statement for t	ne purpose of changing its	s registere	ed office o	r registered	d agent, o	r both, in the State of Florida.		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.										
			857 187 (1. 919)	FEE:IS	\$50.00		7.65.1	DATE		
			Make Check Pa	yable to	Depar	ment of S	State		. '	
9.	<del></del>	MANAGING MEMBERS	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	DUE BY	MAY 1	a gerig	rank ille			
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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 justed empowered to execute this report as required by Chapter 608. Florida Statutes.

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

Daytime Phone #