

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

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

04-22-2002 90235 028 ****50.00

DOCUMENT # L00000013715

1. Entity Name

EARLY BYRD SPORT FISHING, LLC

943223

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

114 South Street

Suite, Apt. #, etc.

3. Mailing Address

114 South Street

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Neptune Beach, FL

City & State

Neptune Beach, FL

4. FEI Number

59-2687706

Applied For

Not Applicable

Zip

32266

Country

US

Zip

32266

Country

US

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name
RAX CO.

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

c/o Jason E. Campbell

50 N. Laura Street, Suite 3300

City

Jacksonville

FL

Zip Code

32202

**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

M
Hadlow, Bryce P.
114 South Street
Neptune Beach, FL 32266

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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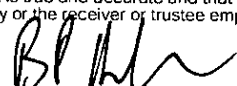
STREET ADDRESS

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:



Bryce P. Hadlow, Member

4/8/02

904-247-0047

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

Date

Daytime Phone #

CR2E083B (12/01)