

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

FILED
Jun 04, 2002 8:00 am
Secretary of State

06-04-2002 90220 041 ****50.00

DOCUMENT # **200000013881** ✓

1. Entity Name

Rio Publishing, LLC

DO NOT WRITE IN THIS SPACE

968510

2. Principal Place of Business

8438 Newton Rd

Suite, Apt. #, etc.

3. Mailing Address

8438 Newton Rd

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Jacksonville, FL

City & State

Jacksonville, FL

4. FEI Number

59-3679299

☒ Applied For
☐ Not Applicable

Zip

32216

Country

USA

Zip

32216

Country

USA

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Michael J. Munn

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

8438 Newton Rd

City

Jacksonville

FL

Zip Code

32216

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.

Michael J. Munn

5-24-02

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	Managing Member David W. Hacker 2833 Crestwicke Dr Kennesaw, GA 30152	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Managing Member Michael J. Munn 8438 Newton Rd Jacksonville, FL 32216	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Managing Member Daryl A. Munn 8438 Newton Rd Jacksonville, FL 32216	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Managing Member Faith E. Hacker 2833 Crestwicke Dr Kennesaw, GA 30152	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	

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:

David W. Hacker

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

5-20-02

Date

770-218-3076

Daytime Phone #

CR2E083B (12/01)