

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **0000 00014455**

1. Entity Name

DANFE, L.L.C.

Principal Place of Business

Mailing Address

FILED

01 AUG -7 PM 12:17

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

2. Principal Place of Business

2380 S. Quebec St.

3. Mailing Address

408211 W. Broward Blvd.

Suite, Apt. #, etc.

Ste. 205

Suite, Apt. #, etc.

Ste. 200

City & State

Denver, CO

City & State

Plantation, FL

Zip

80231

Country

USA

Zip

33324

Country

USA

4. FEI Number

65-1057217

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☒

\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Jay L Borsky

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

408211 W. Broward Blvd., Ste. 200

City

Plantation

FL

Zip Code

33324

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.

Jay L Borsky

(NOTE: Registered Agent signature required when reinstating)

8-1-01

DATE

**FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State**

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE **Managing Member** ☐ Delete
NAME **Marco Prado**
STREET ADDRESS **2380 Quebec St., Ste. 205**
CITY-ST-ZIP **Denver, CO 80231**

TITLE ☐ Change ☐ Addition
NAME **800004527698**
STREET ADDRESS **-08/09/01--01081--009**
CITY-ST-ZIP *******50.00 *****50.00**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **800004527698**
STREET ADDRESS **-08/09/01--01081--009**
CITY-ST-ZIP *******10.00 *****10.00**

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
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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:

Marco Prado

8-1-01

303-283-1458

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

Date

Daytime Phone #

CR2E083 (11/00)