

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

FILED
Sep 30, 2002 8:00 am
Secretary of State

09-30-2002 90174 040 ****50.00

DOCUMENT # L00000014789

1. Entity Name

Love Unlimited, LLC

DO NOT WRITE IN THIS SPACE

981261

2. Principal Place of Business
136 Wellwood Lane

3. Mailing Address
Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Palm Coast, FL

City & State

4. FEI Number 65-1056145

Applied For
Not Applicable

Zip
31294

Country

Zip

Country

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 Margaret Lenzner

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

136 Wellwood Lane

City Palm coast

FL

Zip Code
31264

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

Margaret Lenzner
Signature, typed or printed name of registered agent and title if applicable

Margaret Lenzner

9/25/02

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	Manager Nancy L. McDaniel 335 Taylor Rd Turtletown, TN 37391	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Manager Terry McDaniel 335 Taylor Rd Turtletown, TN 37391	TITLE NAME STREET ADDRESS 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 1.19.07(3)(f), 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

Nancy L. McDaniel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Nancy L. McDaniel

9-26-02

423-496-4226

Date

Daytime Phone #

CR2E088B (12/01)