

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

DOCUMENT # L01000002664

1. Entity Name

Soft Touch North of Tallahassee, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 SEP 12 PM 2:14

W29/12

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2324 N. MONROE ST

3. Mailing Address

2324 N. MONROE ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

TALLAHASSEE, FLA

City & State

TALLAHASSEE, FLA

4. FEI Number

59-3703532

Applied For

Not Applicable

Zip

32303

Country

LEON

Zip

32303

Country

LEON

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

CHAD P. GARDNER

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

2324 N. MONROE ST

City

TALLAHASSEE

FL

Zip Code

32303

**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**

000007798010--0
-09/17/02--01040--008
*******50.00 *****50.00**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MANAGING member
CHAD P. GARDNER
2324 N. MONROE ST
TALLAHASSEE, FLA 32303

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
REDA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
member
RICHARD J. GARDNER JR
2324 N. MONROE ST
TALLAHASSEE, FLA 32303

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

Richard J. Gardner Jr member 9/11/2002 850 385-9500

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

Date

Daytime Phone #

CR2E083B (12/01)