FILED

Aug 05, 2003 8:00 am Secretary of State

01-29-2003 90041 041 ****50.00 08-05-2003 90028 025 ****50.00

2003 LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #L01000002733

MOUNT PLEASANT INVESTMENTS, LLC

limited liability company or th

SIGNATURE:



Principal Place of Business Mailing Address C/O HARLESTON R. WOOD C/O HARLESTON R. WOOD 275 HAMPTON LANE 275 HAMPTON LANE KEY BISCAYNE FL 33149 KEY BISCAYNE FL 33149 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES 4. FEI Number APPLIED FOR Applied For City & State City & State Not Applicable Zip Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WOOD, HARLESTON R 275 HAMPTON LANE Street Address (P.O. Box Number is Not Acceptable) **KEY BISCAYNE FL 33149** Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By September 24, 2003 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGR TITLE Delete TITLE Change Addition WOOD, HARLESTON R NAME NAME 275 HAMPTON LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **KEY BISCAYNE FL 33149** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

2003 LIMITED LIABILITY COMPANY 90149058

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	MENT # L010000					
MOUNT PLEASANT INVESTMENTS, LLC						
Principal Place of Business Mailing Ad		Mailing Address				
C/O HARLESTON R. WOOD 275 HAMPTON LANE KEY BISCAYNE FL 33149		C/O HARLESTON R. WOOD 275 HAMPTON LANE KEY BISCAYNE FL 33149				
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number APPLIED FOR Applied For Not Applied Applied For		
Zip	Country	Zip	Country	5. Certificate of Status Desired 5.00 Additional Fee Required		
		Registered Agent		7. Name and Address of New Registered Agent		
WOO	OD, HARLESTON R.		Name	· · · · · · · · · · · · · · · · · · ·	· [
275 HAMPTON LANE KEY BISCAYNE FL 33149			Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
					}	
			1	City FL Zip Code		
	named entity submits this statement for tions of registered agent.	the purpose of changing its re-	gistered office or regi	istered agent, or both, in the State of Florida. I am familiar with, and ac	cept	
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE; Ru	egistered Agent signature rec	quired when reinstating) DATE		
			/!!! FEE IS \$50.0	· ·	}	
		Make Check Payable to Due E	to Florida Departi Sy May 1, 2003	ment of State		
9.	MANAGING MEMBER	_ <u></u>	10.	ADDITIONS/CHANGES		
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