

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

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90053 046 ****50.00

DOCUMENT # **LO1000003454**

1. Entity Name

GLADIOLUS PARTNERS, LLC

DO NOT WRITE IN THIS SPACE

80102653

2. Principal Place of Business

16 Lagunita

Suite, Apt. #, etc.

3. Mailing Address

16 Lagunita

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Laguna Beach CA

City & State

Laguna Beach CA

4. FEI Number

05-1079957

Applied For
Not Applicable

Zip

92651

Country

US

Zip

92651

Country

US

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 **DOMENICK LIOCE**

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

1645 PALM BEACH LAKES BLVD, Suite 100

City **WEST PALM BEACH**

FL

Zip Code

33401

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**

9. MANAGING MEMBERS/MANAGERS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

MANAGING MEMBER

TONY CIABATTONI

16 Lagunita

Laguna Beach, CA 92651

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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**DO NOT WRITE
IN THIS SPACE**

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:

Tony Ciabattoni

4-24-02

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

Date

Daytime Phone #

CR2E083B (12/01)