

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

**FILED**  
**Jul 11, 2002 8:00 am**  
**Secretary of State**

07-11-2002 90252 013 \*\*\*\*50.00

DOCUMENT # **L01000004214.**

1. Entity Name

**Youth4US, LLC - Wellness DI**

**DO NOT WRITE IN THIS SPACE**

**970107**

2. Principal Place of Business

**2829 SE 38 St.**

Suite, Apt. #, etc.

3. Mailing Address

**2829 SE 38 St.**

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

**Ocala, FL**

City & State

**Ocala FL**

4. FEI Number

**59-3105749**

Applied For

Not Applicable

Zip

Country

**34480**

**USA**

Zip

Country

**34480**

**USA**

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name **Pashk Shala**

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

**2829 SE 38 St.**

City **Ocala**

**FL**

Zip Code

**34480**

**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, type or printed name of registered agent and title if applicable

**3/18/02**

DATE

**FEE IS \$50.00**

**Make Check Payable to Department of State  
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE **Operating Manager/Secy/Treasurer**  
NAME **Pashk "Paul" Shala**  
STREET ADDRESS **2829 SE 38 St.**  
CITY-ST-ZIP **Ocala FL 34480**

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

Signature and type or printed name of signing managing member, manager, or authorized representative

**3/18/02.**

Date

**352-690-6664**

Daytime Phone #

CR2E083B (12/01)