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

## DOCUMENT # L0100006117

1. Entity Name

**BLUEWATER WASH SYSTEMS, LLC** 



## **FILED** Feb 24, 2003 8:00 am Secretary of State 02-24-2003 90050 021 \*\*\*\*50.00

CITY-ST-ZIP LINCOLN AL 35096  CITY-ST-ZIP  ITILE MGRM OSBURN, JOHN 7594 VINCA ST. NAVARRE FL 32566  TITILE MAME STREET ADDRESS CITY-ST-ZIP  ITILE MAME STREET ADDRESS CITY-ST-						C. V. T. E.S.						
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E. Name and Address of Current Registered Agent  OSBURN, JOHN 7594 WICK ST. NAVARRE FL 32566  8. The above named entity submits this statement for the purpose of changing its registered agent are didigised of registered agent.  SIGNATURE  SIGNATURE  MARY MICK ST.  MARY ARRES OF ST.  SIGNATURE  MARY MICK ST.  MARY ARRES OF ST.  MARY AR	City & State			City & State			33 01 14020					
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OSBURN, JOHN 7594 VINCA ST. NAVARRE FL 32568  8. The above named antity submits this asterment 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  Make Check Payable to Florida Department of State Due By May 1, 2003  9. MANAGING MEMBERS / MANAGERS  10. ADDITIONS / CHANGES  MRR MRRATIRICK, STEVE  10. ADDITIONS / CHANGES  MRR MRRATIRICK, STEVE  10. ADDITIONS / CHANGES  MRR MRR MRRATIRICK, STEVE  10. ADDITIONS / CHANGES  MRR MRR MRR ASS96  10. ADDITIONS / CHANGES  MRR MRR MRR MRR ASS96  11. ADDITIONS / CHANGES  MRR MRR MRR MRR ASS96  12. ADDITIONS / CHANGES  MRR MRR MRR MRR ASS96  13. ADDITIONS / CHANGES  MRR MRR MRR MRR ASS96  MRR MRR MRR MRR ASS96  MRR MRR MRR MRR MRR MRR MRR MRR MRR MR				istered Agent			7. Name a	nd Address of New I	Registered /	•		┥
Street Address (P.O., Box Nymber is Not Aggespable)  City Navmer FL 7/15/20/6/6  City Navmer FL 7/15/20/6/6  6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  FL 7/15/20/6/6  SIGNATURE  FL 7/15/20/6/6  SIGNATURE  FL 7/15/20/6/6  SIGNATURE  FL 8/15/15/15/15/15/15/15/15/15/15/15/15/15/	OSF		د د همهند در بتعول د	يدود بروية بولد يدار	_:	Name	The series	6-1 - · · ·	· · · · · · · · · · · · · · · · · · ·		المرزوب أمست	-1"
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SIGNATURE Products provided any provided any provided and provided and agent signature magnitude whom remaissing)    FILE NOW!!! FEE IS \$50.00	<ol><li>The above the obligat</li></ol>	named entity submits this tions of registered agent.	statement for the	purpose of changing it	s registere	ed office or register	ed agent, or l	ooth, in the State of Flo	orida. I am f	amiliar with,	and accept	1
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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:

850. 836.6434