

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

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90207 010 ****50.00

DOCUMENT # L 01000007473

1. Entity Name

Hopper's Brewery, LLC

DO NOT WRITE IN THIS SPACE

960976

2. Principal Place of Business

36221 East Lake Rd

Suite, Apt. #, etc.

3. Mailing Address

1015 TOSKI DR

Suite, Apt. #, etc.

City & State

Palm Harbor, FL

City & State

New Port Richey, FL

Zip

34677

Country

USA

Zip

34655

Country

USA

4. FEI Number

59-3722499

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Shawn Dunlap

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

1015 TOSKI DR

City New Port Richey

FL

Zip Code

34655

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]
Signature, typed or printed name of registered agent and date if applicable.

4/26/02
DATE

FEE IS \$50.00

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

9. MANAGING MEMBERS/MANAGERS

TITLE President
NAME Shawn Dunlap
STREET ADDRESS 1015 TOSKI DR
CITY - ST - ZIP New Port Richey, FL 34655

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE Vice President
NAME Lucy Dunlap
STREET ADDRESS 1015 TOSKI DR.
CITY - ST - ZIP New Port Richey, FL 34655

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

Date

Daytime Phone #

4/26/02 (727) 372-6791

CR2E083B (12/01)