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

## FILED Apr 22, 2002 8:00 am Secretary of State

" = " = "	JMENT # LO10000093  MHL AT TRAFALGAR, LLO	` '	- 10 <u></u>			04-22-2002 9	0165 012 ****50.00	
	DO NOT WRITE	IN THIS S	SPACE				a o 4 T	
2. Principal Place of Business 2255 Glades Road Suite Apt. #. etc. Suite 419		3. Mailing Address 2255 Glades Road Suite, Apt. #, etc.			-   -			
					DO NOT WRITE IN THIS SPACE			
City & Sta	ite	Suite 419 City & State			A FELLINATION OF THE PROPERTY			
Boca Raton Zip Country		Boca Raton			198–36–6801 Applied For Not Applied For			
33431		33431	Country Palm	Beach	5. Certificate of S	tatus Desired	\$5.00 Additional Fee Required	
	in the second	the Control of the Co	2 - L	Name	7. Name and Addr	ess of Current Regis	tered Agent	
DO NOT WRITE IN THIS SPACE				Marcia H. Langley, Esq.  Street Address (P.O. Box Number is Not Acceptable)  2255 Glades Road, Suite 419				
	en in die Afrika. Die George Großen in die Afrikansk in die		-	City			Zip Code	
8. The above	named entity submits this statement for	the purpose of changing it	s registered o	ffice or registe	Raton	the State of Florida	33431	
SIGNATURE .	Signature, typed or printed name of registered agent ar	Make Check Pi	FEE IS \$50 ayable to D DUE BY M/	epartment o	<b>f.State</b>	D <i>e</i>	TE ,	
TITLE	MANAGING MEMBERS/MANAGERS  Sole Member							
NAME Street Address City-S1-Zip	Marcia H. Langley 17735 Fieldbrook Cir	NAME STREET ADI		er er	4.			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Boca Raton, FL 33496		TITLE NAME STREET ADD	DRESS				
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<ol> <li>I heroby cer indicated or limited liabili</li> </ol>	tify that the information supplied with this this report is true and accurate and that tly company or the receiver or trustee em	filing does not qualify for t my signature shall have th powered to execute this re	ne exemption	stated in Secti effect as if maded ed by Chapter	ion 119.07(3)(i), Florid de under oath; that i i 608, Florida Statutes	a Statutes. I further comma managing memb	ertify that the information our or manager of the	

SIGNATURE: 4/15/02 (561)912-3204 MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

MARCIA H. LANGLEY,

Member/Registered Agent