

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

FILED
Jun 05, 2002 8:00 am
Secretary of State

06-05-2002 90399 009 ****50.00

DOCUMENT # **L01000009884**

1. Entity Name

Florida Floral LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

771 Main St.

Suite, Apt. #, etc.

3. Mailing Address

771 Main St.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Dunedin FL.

City & State

Dunedin FL.

4. FEI Number

36-4467696

Applied For

Not Applicable

Zip

34698

Country

USA

Zip

34698

Country

USA

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

Spartz, Robert A.

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

771 Main St.

City

Dunedin

FL

Zip Code

34698

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

Robert Spartz Robert Spartz

5/28/02

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

**P
spartz, Robert A
771 Main St.
Dunedin FL. 34698**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**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:

Robert Spartz Robert Spartz

5/28/02

Date

Daytime Phone #

(300) 241-3100

(727) 733-0402

CR2E083B (12/01)