2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

Mailing Address

#230W

2300 GLADES ROAD

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

BOCA RATON FL 33431

DOCUMENT # L01000010034

Country

GOODMAN, CHARLENE 2300 GLADES ROAD

BOCA RATON FL 33431

the obligations of registered agent.

MGR

GOODMAN, CHARLENE

BOCA RATON FL 33432

6. Name and Address of Current Registered Agent

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

1200 NORTH FEDERAL HIGHWAY, SUITE 200

MANAGING MEMBERS/MANAGERS

1. Entity Name

INTERFACE FLL, LLC

Principal Place of Business

2. Principal Place of Business

2300 GLADES ROAD

BOCA RATON FL 33431

Suite, Apt. #, etc.

#230W

City & State

Zip

SIGNATURĖ

9.

TITLE

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STREET ADDRESS

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#230W



Country

Name

City

FILE NOW!!! FEE IS \$50.00

Due By May 1, 2003

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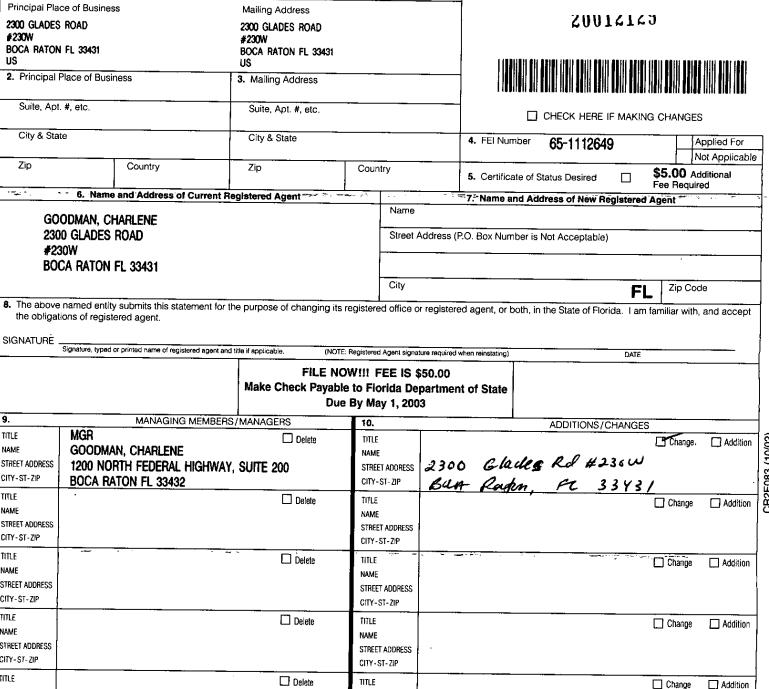
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FILED Jan 21, 2003 8:00 am Secretary of State

01-21-2003 90311 022 ****50.00



CITY-ST-7IP CITY-ST-ZIP 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 of the eceiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

IR ASISMI Manager /14/03 5817505 260 SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

☐ Change

Addition