

# UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **L 01000010098**  
1. Entity Name  
**Eagle Mountain Boots & Shoes, L.L.C.**



FILED

03 MAY 21 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
**6276 Harbour Club Dr.**  
Suite, Apt. #, etc.

3. Mailing Address  
**6276 Harbour Club Dr.**  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
**Lake Worth, FL**  
Zip  
**33461**  
Country  
**USA**

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**Lake Worth, FL**  
Zip  
**33461**  
Country  
**USA**

4. FEI Number  
**65-1131911**  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

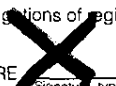
**DO NOT WRITE IN THIS SPACE**

## 7. Name and Address of Current Registered Agent

Name  
**Jackrel, Donald**  
Street Address (P.O. Box Number is Not Acceptable)  
**6276 Harbour Club Dr.**

City  
**Lake Worth** **FL** Zip Code  
**33461**

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. I am familiar with, and accept the obligations of registered agent.

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

**Donald Jackrel**

DATE  
**5/14/03**

**FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**DUE BY MAY 1**

## 9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MEM Jackrel, Donald**  
**6276 Harbour Club Dr.**  
**Lake Worth, FL 33461**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**800019679858**  
**05/21/03--01051--004 \*\*150.00**

TITLE  
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**900020044079**  
**05/28/03 01062 009 \$50.00**

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**RESTATEMENT**  
**0203**  
**Dec**

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

**Donald Jackrel**

DATE  
**5/14/03**

DAYTIME PHONE #  
**954-224-5697**

CR2E083B (12/02)

**May 14, 2003**

**Eagle Mountain Boots & Shoes, L.L.C.  
6276 Harbour Club Drive  
Lake Worth, FL 33461  
Document # L01000010098**

**Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314**

**Re: Reinstatement of Eagle Mountain Boots & Shoes, L.L.C.**

**Dear Division of Corporations:**


**Please apply our enclosed check in the amount \$ 150.00 to the \$ 50.00 you currently have on file for us. You now possess \$ 200.00 on behalf of our organization.**

**As you suggested, \$ 200.00 plus the attached 2003 UBR would fully reinstate our organization.**

**Please provide us written documentation that the reinstatement has occurred.**

**We thank you for your cooperation and we await your esteemed response.**

**Very Truly Yours,**

  
**Donald Jackrel  
Managing Member  
Eagle Mountain Boots & Shoes, L.L.C.  
Document # L01000010098**

**W/enclosures – check payable to FL Department of State in the amount of \$ 150.00, 2003 UBR, Document # L01000010098.**