

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

FILED

03 MAY 20 PM 1:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L 01000010310**

1. Entity Name

DBS Holdings LLC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1208 HAYS STREET
Suite, Apt. #, etc.

3. Mailing Address

1208 HAYS STREET
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

TALLAHASSEE, FLA

City & State

TALLAHASSEE, FLA

4. FEI Number

002-864765

Applied For

Not Applicable

Zip

32301

Country

USA

Zip

32301

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

HURLEY H. BOOTH JR

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

630 CHANCEY LANE

TALLAHASSEE

FL

32308

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

DATE

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
**Mgrm
Booth, Hurley H., Trustee
630 Chancey Lane
Tallahassee, FL 32308**

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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)(l), 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

Date

Daytime Phone #

CR20083B (12/02)