XAmended X LIMITED LIABILITY COMPANY

UNI	IFORM BUSINI	ESS REPORT	Γ (UBR)	,	TILED		
DOCUME 1. Entity Name		01000011007			SECRETARY OF STATE VISION OF CORPORATIONS		
)	STOCK DEV	ELOPMENT, LLC		DAISION DEC	19 AM 8:57		
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			iaus;	du + 100			
2. Principal Place		3. Mailing Address	a Teland (Tircle	ggoogs5	9471	. ア *50.00
8946 Mustang Island Circle 8946 Mustan Suite Apt #, etc. Suite Apt. #, etc.			g Island (12/	19/0201017- DO NOT WRITE		
		City & State Naples, FL			4. FE! Number Applied For 59-3740488 Not Applicable		
Zip 34113	Country USA	Zip 34113	Country	• .	ate of Status Desired		00 Additional Required
pariet el	idi (1646-ca estinti dell'Assets		interpretations	7. Name an	d Address of Current R		
	DO NOT W	RITE	- Care C.	Coleman, Key			
	IN THIS SF	20, 21, 24, 24, 24, 24	Street /	Address (P.O. Box Nur	nber is Not Acceptable)		
		AOE	6.00 (0.6)	4001 Tamiam	Trail North		
			City	Naples	<u> </u>	FL	Zip Code 34103
8. The above nam	ed entity submits this statement fo	or the purpose of changing its	s registered office o	or registered agent, or	both, in the State of Florid	da.	
SIGNATURE	ture, typed or printed name of registered agent	and the Van Carly				***************************************	
	une, typed or printed name of registered agent	kom en e synded debungu	FEE IS \$50.00			DATE	
		Make Check Pa	yable to Depar	tment of State			
9.	MANA CINIC MEMOR		DUE BY MAY 1		embly the section and to the response	Z' 3 A	
TITLE	MANAGING MEMBE	RS/MANAGERS	ame			lahe j	6
NAME Ke	enneth C. Stock D7 Neopolitan Way aples, FL 34103		NAME STREET ADDRESS				(12
CITY-ST-ZIP Na	aples, FL 34103		CITY-ST-ZIP				0838
NAME R	anaging Member rian K. Stock		TITLE !				CR2E083B (12/01
STREET ADDRESS 4	51 Bay Front Plac	e, Unit 5310	STREET ADDRESS				
TITLE N	aples, FL 34102		CITY-ST-ZIP		(And Andreas Service		
NAME			NAME			o niloudes. E o decumba	
STREET ADDRESS CITY-ST-ZIP	يب الما است الله الحييسية حي	The state of the s	STREET ADDRESS CITY-ST-ZIP	**************************************	O'NOT W	VRITE	
TITLE .	•		inice - 🕾 - 🕾	Property of the Section 1995	N THIS S		
NAME STREET ADDRESS			NAME STREET ADDRESS			r AUL	
CITY-ST-ZIP			CITY ST-ZIP				
TITLE NAME	•		TITLE NAME				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP	·		CITY-ST-ZIP	Challen	Taraf Harris, savoja v da	Marilia e d Distributor	
NAME	•		NAME			Party Party (1967)	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY: ST-ZIP				
11. I hereby certify indicated on this	that the information supplied with is report is true and accurate and	this filing does not qualify for	N. 105 (1892 A 95 to 4 1 1 1 1	ted in Section 119.07(8)(i), Florida Statutes. I fu	rther certify tha	it the information
limited liability of	company or the receiver or trustee	powered to execute this	report as required	by Chapter 608, Florid	a Statutes.	inember of t	ianager of the
SIGNATUR	E. Duan	tock)		13	-11-07		Į
SIGNATUR	ATURE AND TYPED OR PRINTED NAME OF	SIGNING MANAGING MEMBER, MAP	AGER, OR AUTHORIZED	REPRESENTATIVE	-/1-0Z	Davtime P	hone 4

Date

Daytime Phone #