LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

(1)

DOCUMENT # L01000011713

1. Entity Name

TROPICAIRE INVESTMENTS L.L.C.

1044

FILED
02 OCT 21 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2. Principal Place of Business		3. Mailing Address	
EASY RIDER BICYCLES		2875 S. UNIVERSITY DRIVE	
Suite, Apt. #, etc.: 2875 S. UNIVERSITY DRIVE		Suite, Apt. #, etc.	
City & State: DAVIE FLORIDA		City & State: DAVIE FLORIDA	
Zip: 33328	Country: U.S.A.	Zip: 33328	Country: U.S.A.

4. FEI Number: 65-1133700 ☐ Applied For ☐ Not Applicable

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

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7. **Name and Address of Current Registered Agent**

Name

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

City FL Zip Code

8. [illegible] named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE PETER SMALLEY P. Smalley 10/15/02
Signature, typed or printed name of registered agent and title if applicable. DATE

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

700008598207
10/25/02--01097--001 **50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR OWNER	TITLE	
NAME	PETER SMALLEY	NAME	
STREET ADDRESS	1705 WHITEHALL DRIVE APART #403	STREET ADDRESS	
CITY-ST-ZIP	DAVIE FL 33324	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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CITY-ST-ZIP		CITY-ST-ZIP	

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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: PETER SMALLEY P. Smalley 10/15/02 954-236-9006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

L01000011713 (2)

15th October, 2002

EASY RIDER
BICYCLES

ATTENTION OF BUCK KOHR

Dear Mr. Kohr.

Re. our phone call on Tuesday, please reinstate Tropicaire Investments L.L.C. as I have purchased a business using the company name.

We did not receive either of the forms for filing an annual report. Please note the new office address for Tropicaire Investments L.L.C. is 2875, South University Drive.

Davie
FL. 33328
Tel. (954) 236-9006
Fax: (954) 236-0109

I would very much appreciate you giving it your urgent attention.

Thanking you in anticipation

P. Smalley - PETER SMALLEY