## FILED 2002 UNIFORM BUSINESS REPORT (UBR) Jan 23, 2002 8:00 am 3 Secretary of State DOCUMENT # L01000012658 1. Entity Name 01-23-2002 90053 015 \*\*\*\*55.00 D & C MARKETING, LLC Principal Place of Business Mailing Address 909230 6013 EAST 26TH STREET. B2 6015 EAST 28TH STREET, B2 > **BRADENTON FL 34203** BRADENTON FL 34203 2. Principal Place of Business 2311-A WHITPIELD 2311-A WHITFIELD IND, WAY Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65- 112558 ARASOTA JARASOTA Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired MANATEE MANATEE 6. Name and Address of Current Registered Agent 7.-Name and Address of New Registered Agent D&C IND<u>USTRIES</u> D & C INDUSTRIES, LLC Street Address (P.O. Box Number is Not Acceptable) 6015 EAST 28TH STREET, B2 **BRADENTON FL 34203** 2311-A WHITFIELD 8. The above named entity submits this statement for the purpose of ghanging its registered office or registered agent, or both, in the State of Florida. FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGR TITLE **X** Change ☐ Addition TITLE ☐ Delete NAME KINTER, CHARLES NAME KINTER 2311-A WHITFIELD INDUSTRIAL WAY STREET ADDRESS STREET ADDRESS 6015 EAST 28TH STREET, B2 CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34203** SARASOTA MGR ☐ Delete TITLE TITLE MEHLEとり MEHNERT, DAVID NAME NAME INDUSTRIAL WAY 0311-A STREET ADDRESS 6015 EAST 28TH STREET, B2 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34203** Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7IP

TITLE

NAME

SIGNATURE:

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

Delete

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

12 Jan 02 941-755-673

Change

Addition