2002 UNIFORM BUSINESS REPORT (UBR)

01-16-2002 90256 031 ****50.00
L01000013658

FILED
2002 NOV 25 AM 9:08
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000013658

1. Entity Name
KLEYNBERG FAMILY, LLC

Principal Place of Business	Mailing Address
3874 ORANGE LAKE DRIVE ORLANDO FL 32817	3874 ORANGE LAKE DRIVE ORLANDO FL 32817

2. Principal Place of Business	3. Mailing Address
3874 ORANGE LAKE DR.	3874 ORANGE LAKE DR
Suite, Apt. #, etc. ORLANDO FL 32817	Suite, Apt. #, etc.
City & State ORLANDO FL	City & State ORLANDO FL
Zip 32817 Country USA	Zip 32817 Country USA

4. FEI Number 59-3741455 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

KLEYNBERG, LEONID
3874 ORANGE LAKE DRIVE
ORLANDO FL 32817

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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.

SIGNATURE ______ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM LEONID KLEYNBERG 14395 ADDISON ST. #309 SHERMAN OAKS, CA 91423 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E083 (9/01)

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: L. Kleynberg MGRM 01/07/2002 (407)678-3678
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #