

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 15, 2003 8:00 am**  
**Secretary of State**

07-15-2003 90017 012 \*\*\*\*\*50.00

**DOCUMENT # L01000014250**

1. Entity Name  
JLW, LLC



Principal Place of Business  
C/O NELSON & LEVINE, P.A.  
2275 SUNNY ISLES BLVD. SUITE 118  
NORTH MIAMI BEACH FL 33160

Mailing Address  
C/O NELSON & LEVINE, P.A.  
2275 SUNNY ISLES BLVD. SUITE 118  
NORTH MIAMI BEACH FL 33160



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-1147143

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NELSON, BARRY A  
C/O NELSON & LEVINE  
2775 SUNNY ISLES BLVD, SUITE 118  
NORTH MIAMI BEACH FL 33160

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**\$0.00**

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By September 24, 2003**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
WARGA, JAMES L  
2242 FISHER ISLAND DRIVE  
FISHER ISLAND FL 33109 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
WARGA FAMILY HOLDINGS, INC.  
2775 SUNNY ISLES BLVD, SUITE 118  
NORTH MIAMI BEACH FL 33160 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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:

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

Date

Daytime Phone #

*James L. Warga*

7/9/03

305 932 2000

*Attachment*  
LAW OFFICES OF  
**NELSON & LEVINE, P.A.**

2775 Sunny Isles Boulevard, Suite 118  
North Miami Beach, Florida 33160

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Telephone: 305.932.2000  
TeleFax: 305.932.6585

**Barry A. Nelson**  
Fellow, American College of  
Trust and Estate Counsel  
Master of Laws in Taxation  
Board Certified Taxation &  
Wills, Trusts & Estates

**Marcia E. Levine**  
Master of Laws in Taxation

**Kevin E. Packman**  
Master of Laws in Estate Planning

\*\*\*\*\*  
**Mirlene E. Dubreuzé**  
Office Manager

OF COUNSEL

**Richard B. Comiter**  
Master of Laws in Taxation  
Board Certified Taxation

**John F. Hernandez**  
Master of Laws in Taxation

**Judith S. Nelson**  
Former Judge of Compensation Claims

**Mitchell E. Silverstein**  
Master of Laws in Taxation

July 9, 2003

VIA CERTIFIED MAIL 71879221000000007642  
RETURN RECEIPT REQUESTED

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: **JLW, LLC**  
Our Client Reference No. 00985 (C.1)

Dear Sir/Madam:

Enclosed please find the following:

1. Fully executed 2003 For Profit Corporation Uniform Business Report; and
2. Check made payable to the "Department of State" in the amount of \$50.00.

Please acknowledge receipt of the enclosed documents by signing the acknowledgement letter returning it to me. I have enclosed a self-addressed return envelope for your convenience.

Very truly yours,

*Kevin E. Packman*  
KEVIN E. PACKMAN  
For the Firm

KEP/lr  
Enclosures  
H:\CLIENTS\WARGA\LETTERS\UBR\2003 JLW LLC.DOC

Receipt of the 2003 For Profit Corporation Uniform Business Report and check in the amount of \$50.00 is hereby acknowledged this \_\_\_\_\_ day of \_\_\_\_\_, 2003.

DEPARTMENT OF STATE

By: \_\_\_\_\_

*90142981*  
*# L01000014250*

*7/10/03 -*

*The form was sent inadvertently without enclosing the \$50.00 check. Please attach enclosed check to form and process.*

*Thank you.*

*AK*