## 2002 UNIFORM BUSINESS REPORT (UBR)

## FILED May 24, 2002 8:00 am Secretary of State

DOCUMENT # L01000014870  1. Entity Name						04-17-2002 90036 042 ****50.00				
-	O BILOBA, LLC	1								
Principal Plac	ce of Business	Mailing Address			$\dashv$		+			
717 PONCE DE LEON BLVD. SUITE 317 CORAL GABLES FL 33134			717 PONCE DE LEON BLVD.							
		Suite 317 Coral Gables Fl. 33134								
					l i	Principal de l'ann de l'ann ann ann	II 90111 80111 9011	ı (CDT) BIBBI TREY	10011 0017 1001	
2. Principal Place of Business  Suite, Apt. #, etc.  City & State		3. Mailing Address								
		Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
		City & State	City & State		4. FEI N		5118	Applied For Not Applicable		
Zip	Country	Zip	Countr	гу		icate of Status Desir		\$5.00 Ac	lditional	1
	6. Name and Address of Curren	t Registered Agent -			7."Nam	and Address of N	ew Registere	Fee Requir		4
				··Name	بهرسته بدائد رسته		<u> </u>			₹-
717	euel M. Gonzalez, P.A. Ponce de Leon Blvd.			Street Addres	ss (P.O. Box N	lumber is Not Accep	table)			]
	TE 317 RAL GABLES FL 33134									1
				City			F	Zip Cod	ie	1
a. The above	named entity submits this statement f	or the purpose of changing its	ts registered	d office or regis	stered agent, o	or both, in the State	of Florida.			1
				٠, .						
SIGNATURE .	Signature, typed or printed name of registered agen	t and title if applicable. (NOT	TE: Registered /	Agent signature requ	uired when reinstati	ng)	DATE			
		FILE N	OW!!! FI	EE IS \$50.0	ю	ng)	DATE			
		FILE N Make Check Pa	OW!!! Fi	EE IS \$50.0 Department	ю	ng)	DATE	· · · · · · · · · · · · · · · · · · ·		
	Signature, typed or printed name of registered agen	FILE N Make Check Pa Du	OW!!! Fi	EE IS \$50.0 Department	ю			3		
	Signature, typed or printed name of registered agent MANAGING MEMBI	FILE N Make Check Pa Du	OW!!! Fi	EE IS \$50.0 Department	ю		DATE	S Change	☐ Addition	(10)
SIGNATURE .  3.  TITLE IAME	Signature, typed or printed name of registered agen  MANAGING MEMBI  MGRM  GARDA, ALBERTO	FILE N Make Check Pa Du ERS/MANAGERS	Yayable to ue By May 10.	EE IS \$50.0 Department y 1, 2002	ю				☐ Addition	3 (9/01)
SIGNATURE	Signature, typed or printed name of registered agent MANAGING MEMBI MGRM GARDA, ALBERTO 717 PONCE DE LEON BLVD.	FILE N Make Check Pa Du ERS/MANAGERS	Yayable to ue By May 10.	EE IS \$50.0 Department y 1, 2002	ю				☐ Addition	F083 (9/01)
SIGNATURE .  TITLE IAME	MANAGING MEMBI MGRM GARDA, ALBERTO 717 PONCE DE LEON BLVD. CORAL GABLES FL 33134 MGRM	FILE N Make Check Pa Du ERS/MANAGERS	NOW!!! File ayable to ue By May 10.  TITLE NAME STREET	EE IS \$50.0 Department y 1, 2002	ю				Addition	CR2F083 /9/01)
SIGNATURE .  TITLE  LAME  STREET ADDRESS  SITY-SI-ZIP  TITLE	MANAGING MEMBI MGRM GARDA, ALBERTO 717 PONCE DE LEON BLVD. CORAL GABLES FL 33134 MGRM INFANZO, GRACIELA	FILE N Make Check Pa Du ERS/MANAGERS  Delete	NOW!!! File ayable to ue By May 10.  TITLE NAME STREET CITY-S TITLE NAME	EE IS \$50.0 Department y 1, 2002	ю			☐ Change		CROFORA (9/01)
SIGNATURE  TITLE  HAME  STREET ADDRESS  CITY-SI-ZIP  TITLE	MANAGING MEMBI MGRM GARDA, ALBERTO 717 PONCE DE LEON BLVD. CORAL GABLES FL 33134 MGRM INFANZO, GRACIELA 717 PONCE DE LEON BLVD.	FILE N Make Check Pa Du ERS/MANAGERS  Delete	NOW!!! File ayable to ue By May 10.  TITLE NAME STREET CITY-S TITLE NAME	EE IS \$50.0 Department y 1, 2002 ADDRESS	ю			☐ Change		CROEDRA (9/01)
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