

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90212 027 ****50.00

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #

1. Entity Name

ROBERGE FINANCIAL SERVICES, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
18 Wall Street

Suite, Apt. #, etc.

3. Mailing Address

18 Wall Street

Suite, Apt. #, etc.

City & State

Orlando, FL

City & State

Orlando, FL

4. FEI Number

59-3742587

Applied For

Not Applicable

Zip

32801

Country

Orange

Zip

32801

Country

Orange

6. Certificate of Status Desired



\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

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

1201 Hays Street

City

Tallahassee

FL

Zip Code
32301

**DO NOT WRITE
IN THIS SPACE**

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.

DATE

FEE IS \$50.00

Make Check Payable to Department of State
DUE BY MAY 1

1. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Manager
Carl Roberge
3004 Barkley Grove Loop
Bellingham, WA 98266

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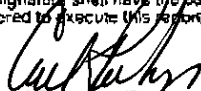
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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.

Carl Roberge

SIGNATURE:



04/26/2002

(604) 542-2449

CR2002038 (12/01)