LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED Apr 01, 2002 8:00 am Secretary of State

DOCUMENT # LO10000155YY 1. Entity Name DO NOT WRITE IN THIS SPACE					اله ، فيعدي ي		
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State ST AUGUSTINE FL		City & State		. 4. FEI I	4. FEI Number Applied For YU - UUU7541 Not Applicable		
Zip 3201	Country	Zip	Country	5Cert	ficate of Status-Desired	\$5.00 Additional Fee Required	
		· · · · · · · · · · · · · · · · · · ·		7. Name	and Address of Current R	· · · · · · · · · · · · · · · · · · ·	
			Name				
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8. The above	named entity submits this statement for	or the purpose of changing its r	egistered office or re	egistered agent,	or both, in the State of Flori	da.	
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JIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable.	·			DATE	
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9.	MANAGING MEMBE	RS/MANAGERS					
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NAME	PERRY REGILS		NAME	•			
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	ertify that the information supplied with		CITY-ST-ZIP				

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: Perry Richard Penny Richard And Typed on Printed name of Signing Managing Member, Manager, on authorized Representative

3/11/02

Daytime Phone #