FILED

Feb 25, 2004 8:00 am

## IITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L01000016504



**Secretary of State** 02-25-2004 90284 039 \*\*\*\*50.00 YU & CHUNG, LLC Principal Place of Business Mailing Address THE MALL AT WELLINGTON GREEN MALL THE MALL AT WELLINGTON GREEN MALL 24014362 10300 W. FOREST HILL BLVD., FC110 10300 W. FOREST HILL BLVD., FC110 WELLINGTON FL 33414 WELLINGTON FL 33414 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-3745049 Not Applicable Zip Country Ζip Country \$5.00 Additional 5. Certificate of Status Desired П Fee Required \_6. Name and Address of Current Registered Agent. 7. Name and Address of New Registered Agent Name CHUNG, ERIC Street Address (P.O. Box Number is Not Acceptable) 10300 W. FOREST HILL BLVD., FC110 **WELLINGTON FL 33414** 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGR TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME CHUNG. ERIC STREET ADDRESS 1250 PRIMROSE LANE STREET ADDRESS CITY-ST-ZIP **WELLINGTON FL 32414** CITY-ST-ZIP TITLE MGR Delete ☐ Change ☐ Addition NAME CHUNG, ALFRED STREET ADDRESS STREET ADDRESS 590 NORTH EAST 53RD STREET CITY-ST-ZIP CITY-ST-ZIF OCALA FL 34479 TITLE Change Addition ☐ Delete TITÉE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRÉSS STREET ADDRESS

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.

CITY-ST-ZIP

CITY-ST-ZIP

JRE: LANG CATURE ENQUENTS
SIGNATURE AND TYPED OR PRINTED NAME OF GINNING MANAGING MEMBER, MANAGER, OF AUTHORIZED REPRESENTATIVE