2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED Apr 14, 2003 8:00 am Secretary of State

		45046			٦ .	03-26-200	_	043 ****		
1. Entity Nan	MENT # LO1000 0 RIBE AVIATION, LLC			03-26-200	3 90048	043	30.00			
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Principal Place of Business Mailing Address] //					
1945 SEVILLA BLVD., W. ATLANTIC BEACH FL 32233		1945 SEVILLA BLVD W. ATLANTIC BEACH FL 32233								
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2. Principal Place of Business		3. Mailing Address				-59-37 <i>51</i>	11111111111111111111111111111111111111			. ,
Suite, Apt. #, etc.		Suite, Apt. #, etc.		//	\			CHANGES	• •	
City & State		City & State		1/5-	4. FEI Nun	4. FEI Number APPLIED FOR Applied For S9-3751341 Not Applied				
Zip	Country	Zip	Cour	itry	- 1:	ite of Status Desired	ñ :	\$5.00 Add	ditional '	1
	6. Name and Address of Current	Registered Agent	<u> </u>	11	7. Name a	nd Address of New R		Fee Require	//	_
ROS	BERTS, CHAD'S			Name		-		/	سے کیے	7
1945 SEVILLA BLVD., W.				Street Address	(P.O. Box Nurr	ber is Not Acceptable) -	1/	•	7
ATLANTIC BEACH FL 32233							//	7		٦
	\bigcirc			City			FL	Zip Cod	e .	7
8. The above	named eptity submits this statement for	the purpose of changing its	register	ed office or registe	ered agent, or t	on, in the State of Flo	rida. I am fa	miliar with,	and accept	7
	tions of registered agent.									
SIGNATURE .	Signature, Nood or privilegy assist of registered agent a	nd title if applicable. (NOT	E: Registere	d Agent signature require	ed when reinsteang)		DATE			Ţ
				FEE IS \$50.00	'					
		Make Check Payab		orida Departme ay 1, 2003	ent of State					
9.	MANAGING MEMBEI		10.			ADDITIONS/	CHANGES		·	\dashv
TITLE	MGRM	☐ Delete	TITL	ſ		•		Change	Addition	ବ୍ଲ
NAME STREET ADDRESS	ROBERTS, CHAD S 1945 SEVILLA BLVD. W		NAM! STRE	ET ADORESS						ξ 2
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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 employered of execute this report as required by Chapter 608, Florida Statutes. 904 - 354 - 831.0										
(SICAL) 3 . 2 . 3 . 8 . 3										
SIGNATURE: SIGNATURE:]