2002 UNIFORM BUSINESS REPORT (UBR)

Jan 28, 2002 8:00 am Secretary of State DOCUMENT # L01000019363 01-28-2002 90022 020 ****50.00 RUPPEL PAINTING, LLC Principal Place of Business Mailing Address 4468 WINNERS CIRCLE 4468 WINNERS CIRCLE APT. #2221 APT. #2221 SARASOTA FL 34238 SARASOTA FL 34238 2. Principal Place of Business Tamiani TRAIC Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE ULTE City & State Cib⊁& State 4. FEI Number Applied For 15067 Not Applicable Country Ζiρ Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ASTRONSKAS, CATHERINE L Street Address (P.O. Box Number is Not Acceptable) 5900 S. TAMIAMI TRAIL SUITE I SARASOTA FL 34231 Zip Code City omits this statement for the purpose of changing its of stered office or registered agent, or both, in the State of Florida 8. The above named epitty su SIGNATURE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. MGR Change ☐ Addition TITLE ☐ Delete NAME RUPPEL, TIMOTHY SCOT NAME 4468 WINNERS CIRCLE - # 2221 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34238 James Michael Ruppel 4468 Winners Crecke Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition गा। ह ☐ Change TITLE Deleté NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE NAME: AT TO STREET ADDRESS STREET ADDRESS 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.

AUTHORIZED REPRESENTATIVE

FILED