

FILED
May 08, 2003 8:00 am
Secretary of State

04-21-2003 90119 037 ****50.00

**2003 LIMITED LIABILITY COMPANY
 UNIFORM BUSINESS REPORT (UBR)**

4/2

DOCUMENT # L01000020217			
1. Entity Name SIRIUS HOLDINGS, LLC			
Principal Place of Business 7284 PALMETTO PARK RD STE 105 BOCA RATON FL 33431		Mailing Address 301 YAMATO RD., STE. 4150 BOCA RATON FL 33431	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. Name and Address of Current Registered Agent		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
BULMAN, RICHARD C JR ESQ. SACHS, SAX & KLEIN, P.A. 301 YAMATO RD., STE. 4150 BOCA RATON FL 33431		6. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		Zip Code	
7. 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.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____			
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BULMAN, RICHARD C JR ESQ. 301 YAMATO RD., STE. 4150 BOCA RATON FL 33431 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

05-05 4700 1
 55038991


☐ CHECK HERE IF MAKING CHANGES

APPLIED FOR ☐ **Applied For**
☐ **Not Applicable**

CR2003 (10/02)

DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
HOLTSVILLE NY 00501

DATE OF THIS NOTICE: 12-20-2002
NUMBER OF THIS NOTICE: CP 575 E
EMPLOYER IDENTIFICATION NUMBER: 05-0544054
FORM: SS-4
0133048110 0

Attachment

60100020217
55038991

FOR ASSISTANCE CALL US AT:
1-800-829-1040

SIRIUS HOLDINGS LLC
RESS ANDREW M SOLE MEMBER
7284 PALMETTO PARK RD W STE 105
BOCA RATON FL 33433

OR WRITE TO THE ADDRESS
SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE
STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN 05-0544054. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Use your complete name and EIN shown above on all federal tax forms, payments and related correspondence. If you use any variation in your name or EIN, it may cause a delay in processing and incorrect information in your account. It also could cause you to be assigned more than one EIN.

If you want to apply to receive a ruling or a determination letter recognizing your organization as tax exempt, and have not already done so, you should file Form 1023/1024, Application for Recognition of Exemption, with the IRS Ohio Key District Office. Publication 557, Tax Exempt Status for Your Organization, is available at most IRS offices and has details on how you can apply.

Keep this part for your records.

CP 575 E (Rev. 1-2001)

Return this part with any correspondence
so we may identify your account. Please
correct any errors in your name or address.

CP 575 E

0133048110

Your Telephone Number Best Time to Call
()

DATE OF THIS NOTICE: 12-20-2002
EMPLOYER IDENTIFICATION NUMBER: 05-0544054
FORM: SS-4

INTERNAL REVENUE SERVICE
HOLTSVILLE NY 00501

SIRIUS HOLDINGS LLC
RESS ANDREW M SOLE MEMBER
7284 PALMETTO PARK RD W STE 105
BOCA RATON FL 33433