

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

FILED
Apr 11, 2002 8:00 am
Secretary of State

03-07-2002 90151 025 ****50.00

DOCUMENT # L01000021077

1. Entity Name

B.R.Y., LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1300 THIRD ST. SOUTH

Suite, Apt. #, etc.

3. Mailing Address

1300 THIRD ST. SOUTH

Suite, Apt. #, etc.

City & State

NAPLES, FLORIDA

City & State

NAPLES, FLORIDA

4. FEI Number

153-42-5172

Applied For

Not Applicable

Zip

34102

Country

COLLIER

Zip

34102

Country

COLLIER

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name BRUCE YAMRON

Street Address (P.O. Box Number is Not Acceptable)

1300 THIRD ST. SOUTH

City NAPLES

FL

Zip Code
34102

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

BRUCE YAMRON, PRESIDENT

02/20/02

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PRESIDENT
BRUCE YAMRON
1300 THIRD ST. SOUTH
NAPLES, FL 34102

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 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

BRUCE YAMRON

02/20/02

Date

Daytime Phone #

(941) 261-7707

CR2E083B (12/01)