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

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

## DOCUMENT # L01000021517

1. Entity Name

STING RAY, L.L.C.



**FILED** Jan 07, 2003 8:00 am Secretary of State 01-07-2003 90041 044 \*\*\*\*50.00

rincipal Place of Business  10 VICTORY GARDEN DR. #D30  ALLAHASSEE FL 32301		Mailing Address P.O. BOX 14223 TALLAHASSEE FL 32317					MUUUUA	JÜ		
ILLAHASSEL TI	L 32001									
Principal Place of Business 6047 P:ml:C3 Crt Suite, Apt. #, etc.  City & State 1-11chaster Fa		3. Mailing Address  Suite, Apt. #, etc.  City & State				. □ CHECK HERE IF MAKING CHANGES				
					4. FEI	4. FEI Number 26-0036477			<u> </u>	plied For at Applicable
Zip 32312	Country	Zip	Count	try	<b>4.</b> 44.		Status Desired		\$5.00 Add Fee Require	
	6. Name and Address of Current	Registered Agent			7. Nar	ne and Ad	dress of New I	Registered	Agent	
DICH	ADD IA DOWEDS DA			Name						
RICHARD M. POWERS, P.A. 315 SOUTH CALHOUN ST., STE. 308 TALLAHASSEE FL 32301				Street Address (P.O. Box Number is Not Acceptable)						
•	. •			City			· <del>-</del>	FL	Zip Cod	e
	named entity submits this statement foons of registered agent.	r the purpose of changing it	ts registere	ed office or re	egistered agent	, or both,	in the State of F	orida. Lam	familiar with,	and accept
SIGNATURE _	Signature, typed or printed name of registered agent	and title if applicable (NC	TE: Registered	d Agent signature	required when reinst	ating)		DATE		<del></del>
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