

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

FILED
May 03, 2002 8:00 am
Secretary of State

05-03-2002 90056 006 ****50.00

DOCUMENT # L01000021688

1. Entity Name

~~PUBLIC LAND ACQUISITIONS, LLC~~

Land Acquisitions, LLC

NC (AM)

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

970 W. McNAB ROAD

3. Mailing Address

1001 W. CYPRESS CREEK RD

Suite, Apt. #, etc.

100

Suite, Apt. #, etc.

320

City & State

Fort LAUDERDALE, FL

City & State

Fort LAUDERDALE, FL

Zip

33309

Country

USA

Zip

33309

Country

USA

4. FEI Number

26-0000183

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

BETH E. LINZNER

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

1001 W. CYPRESS CREEK ROAD

Suite 320

City

Fort LAUDERDALE FL

Zip Code

33309

**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

Beth E. Linzner

4/25/02

DATE

FEE IS \$50.00

Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE	MANAGER
NAME	BETH E. LINZNER
STREET ADDRESS	1001 W. CYPRESS CREEK RD #320
CITY-ST-ZIP	Fort LAUDERDALE, FL 33309
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NAME	
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CITY-ST-ZIP

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IN THIS SPACE**

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

4/25/02

(954) 776-5900