

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

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90017 016 *****50.00

DOCUMENT # L01000022580

1. Entity Name

M.R. METZ, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

558 W. New England Avenue

Suite, Apt. #, etc.

Suite 240

City & State

Winter Park, Florida

Zip

32789

Country

United States

3. Mailing Address

3198 Edgewater Drive

Suite, Apt. #, etc.

City & State

Gainesville, Georgia 30501

Zip

30501

Country

United States

DO NOT WRITE IN THIS SPACE

4. FEI Number

☒

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Robert B. White, Jr., Esquire

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

558 West New England Avenue

Suite 240

City

Winter Park

FL

Zip Code

32789

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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.

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

Majority Member

M. Rodney Metz

3198 Edgewater Drive

Gainesville, Georgia 30501

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

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

Date

Daytime Phone #

M. Rodney Metz 2/15/02

770287-8927

CR2E083B (12/01)