

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

FILED
Mar 21, 2003 8:00 am
Secretary of State

03-21-2003 90029 013 ****50.00

DOCUMENT # *L02000003088*

1. Entity Name

Christ Investment Group LLC ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

301 Clematis St.

3. Mailing Address

301 Clematis St.

Suite, Apt. #, etc.

3000

Suite, Apt. #, etc.

3000

City & State

W.P.B. Fla.

City & State

W.P.B.

Zip

33401

Country

USA

Zip

Fla

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

820545195

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name *Daniel Imperato*

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

301 Clematis St.

City *W.P.B.*

FL

Zip Code

33401

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

March 15, 2003

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
*Chairman
Daniel Imperato
301 Clematis St. 3000
W.P.B. Fla.*

TITLE
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**DO NOT WRITE
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 #

3/15/03 561 644 1836

CR2E083B (12/01)