

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 02, 2003 8:00 am
Secretary of State

05-02-2003 90567 002 ****50.00
09-02-2003 90123 017 ****50.00

DOCUMENT # L02000006412

1. Entity Name
RMJ STABLES, LLC



Principal Place of Business
**12937 WEST OKEECHOBEE ROAD
CONDOMINIUM D. UNIT NO. 283
HIALEAH GARDENS FL 33016**

Mailing Address
**12937 WEST OKEECHOBEE ROAD
CONDOMINIUM D. UNIT NO. 283
HIALEAH GARDENS FL 33016**

2. Principal Place of Business

**12913 W. Okeechobee Rd.
Suite, Apt. #, etc.
G1**

City & State
Hialeah Gardens, FL

Zip Country
33018 USA

3. Mailing Address

**12913 W. Okeechobee Rd.
Suite, Apt. #, etc.
G1**

City & State
Hialeah Gardens, FL

Zip Country
33018 USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MEAHJOHN, ZANIM RALPHY
12937 WEST OKEECHOBEE ROAD
CONDOMINIUM D, UNIT NO. 283
HIALEAH GARDENS FL 33016**

7. Name and Address of New Registered Agent

Name
MeahJohn, Zanim Ralph
Street Address (P.O. Box Number is Not Acceptable)
12913 W. Okeechobee Rd.
Suite G1
City
Hialeah Gardens FL Zip Code
33018

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Ralph Zanim Meahjohn**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

8/26/03.
DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By September 24, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
MEAHJOHN, ZANIM RALPHY
12937 WEST OKEECHOBEE ROAD
HIALEAH GARDENS FL 33016** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
MeahJohn, Zanim Ralph
12913 W. Okeechobee Road #G1
Hialeah Gardens, FL 33018** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

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 REQUIRED**

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

Date

Daytime Phone #

8/26/03.

CR2E083 (4/03)