

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

5/1/2003-90077-033-\$50.00-\$50.00 *
9/18/2003-90002-028-\$50.00-\$50.00
DIVISION OF CORPORATIONS

03 SEP 29 PM 3:36

LL 10/06

DOCUMENT # L02000011173

1. Entity Name

EUROVEST PARTNERS, LLC



Principal Place of Business

Mailing Address

100 E. SYBELIA AVE., STE. 105
MAITLAND FL 32751

100 E. SYBELIA AVE., STE. 105
MAITLAND FL 32751

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-0249911

Applied For

Not Applicable

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCDOWELL, JOHN
100 E. SYBELIA AVE., STE. 105
MAITLAND FL 32751

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete
NAME MCDOWELL, JOHN
STREET ADDRESS 100 E. SYBELIA AVE., STE. 105
CITY-ST-ZIP MAITLAND FL 32751

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

TITLE MGR ☐ Delete
NAME HAHNE, HANS
STREET ADDRESS 104 RED BAY DR.
CITY-ST-ZIP LONGWOOD FL 32779

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

TITLE MGR ☐ Delete
NAME MCDOWELL, MARK
STREET ADDRESS 100 E. SYBELIA AVE., STE. 105
CITY-ST-ZIP MAITLAND FL 32751

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

TITLE MGR ☐ Delete
NAME MCDOWELL, MICHAEL
STREET ADDRESS 100 E. SYBELIA AVE., STE. 105
CITY-ST-ZIP MAITLAND FL 32751

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 #

09/15/03 407 231-6404

CP2E083 (4/03)