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SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 JUN 23 PM 3:05

6/23

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000014965

1. Entity Name
DCC OF ORLANDO, L.L.C.

Principal Place of Business
228 ST. CHARLES AVE., STE. 000
NEW ORLEANS, LA 70130

Mailing Address
228 ST. CHARLES AVE., STE. 000
NEW ORLEANS, LA 70130

2. Principal Place of Business
5950 HAZELTINE NATIONAL DR
Suite, Apt. #, etc.
410
City & State
ORLANDO FL
Zip 32822 Country U.S.

3. Mailing Address
1100 POYDRAS STREET
Suite, Apt. #, etc.
1355 ENERGY CENTRE
City & State
NEW ORLEANS LA
Zip 70163 Country U.S

☑ 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
C.T. CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent
Name CHUCK HENDRICKS
Street Address (P.O. Box Number Is Not Acceptable)
5950 HAZELTINE NATIONAL DR SUITE 410
City ORLANDO FL Zip Code 32822

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 Charles L Hendrick Jr
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when identifying) DATE

FILING FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

| 9. MANAGING MEMBERS / MANAGERS | | 10. ADDITIONS / CHANGES | |
|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MEMBER<br>PAUL MCCARTHY<br>116 CHERRY CREEK DR<br>MANDEVILLE LA 70448 ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MEMBER<br>ALAN HENTON<br>57 AUDUBON LAKE DR<br>MANDEVILLE LA 70471 ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MEMBER<br>GARTH HERNTWDER<br>3407 HEATHERWOOD<br>HARVEY, LA 70058 ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
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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: Sherry McCarthy, SHERRY MCCARTHY MBR 5/7/03 (504)585-7346
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #