2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000018413

1. Entity Name

BISCAY-ASPEN BUILDING, LLC



FILED
Mar 03, 2003 8:00 am
Secretary of State

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Principal Pla	ace of Business	Mailing Address							
7225 NW 25TH ST., SUITE 110 MIAMI FL 33122		7225 NW 25TH ST., SUIT MIAMI FL 33122	7225 NW 25TH ST., SUITE 110 MIAMI FL 33122						
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2. Principal	Place of Business	3. Mailing Address							
Suite, Apt. #, etc. Suite, Apt. #, e		Suite, Apt. #, etc.	C.			CHECK HERE IF I	MAKING	CHANGE	s
City & Sta	City & State City & State			4. FEI Number 65–6230763			-	Applied For	
Zip	Country	Zip	Coun	itry				5.00 A	dditional
	6. Name and Address of Curre	ent Registered Agent				ınd Address of New Regi		•	
SIM	ON, GARY P	7 7 <u>22</u> 7 7 2 7 7		Name -	gas to manager		cinc		
9100, SO. DADELAND BLVD.,SUITE 504 MIAMI FL 33156		504	Street Address (ss (P.O. Box Nun	nber is Not Acceptable)	_		
	•								
	x•			City			FL	Zip Co	
8. The above the obliga	e named entity submits this statemen tions of registered agent.	t for the purpose of changing i	its registere	ed office or regis	stered agent, or I	both, in the State of Florida	a. I am fa	miliar with	, and accept
SIGNATURE	Signature, typed or printed name of registered ag	ant and title if applicable. (Arr	ott- D	4.4				. <u>.</u>	
 , ,					uired when reinstating)	1	DATE		
		FILE I Make Check Paya		EE IS \$50.0 orida Departn					
				ıy 1, 2003					
9.	MANAGING MEM	BERS/MANAGERS 1	10.			ADDITIONS/CH.	ANGES		
TITLE NAME	MANAGERG	☐ Delete	TITLE	l			[Change	☐ Addition
STREET ADDRESS	M.A. GRONDIN		NAME	ET ADDRESS					
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I nereby ceruly that the information supplied with this filling 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.

PED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

901-492-706