2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000019229 1. Entity Name



FILED Apr 15, 2003 8:00 am Secretary of State 04-15-2003 90026 030 ****50.00

SOUTH C	ONNECTION SERVICES LL	С							
Principal Place of Business 2701 SOUTH BAYSHORE DRIVE. #402 MIAMI FL 33133 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. Mailing Address 2701 SOUTH BAYSHORE DRIVE MIAMI FL 33133 3. Mailing Address Soot Couling Suite, Apt. #, etc.			HORE DRIVE. #402			1 1	<u> </u>	 	51 2 (8)1 1891
			Mins 1	AUZ	CHECK HERE IF MAKING CHANGES				
City & Stat	BEACH, PL	City & State HiAHi	BEACH	. U	4. FÉI Num	15455	43		oplied For ot Applicable
33/4	Country 6. Name and Address of Curren	Zip 33/40 nt Registered Agent	Countr	y 	L	ite of Status Desired	Fee	.00 Add Require	
2701	ine, dominique South Bayshore Drive, #4 Al FL 33133	The second of th		Street Address (South Con 5600 Co P.O. BRAINING	nection Services; collins Avenue, #6 Preschort AVE BEACH	LLC N e)		140
8. The above the obligat	named entity submits this statement ions of registered agent. Signature, typed or printed name of registered age			office or registere		ooth, in the State of F	lorida. I am famil	iar with,	and accept
		FI	LE NOW!!! FE	EE IS \$50.00 rida Departmer			, ·	· ·	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMI MGR CHAINE, DOMINIQUE 2701 SOUTH BAYSHORE DRIV MIAMI FL 33133	BERS/MANAGERS Delet 7E, #402	NAME		os Goll	ADDITIONS AND AUTO	AGN	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CLEM, MELANIE 2701 SOUTH BAYSHORE DRIV MIAMI FL 33133	□ Delet	NAME			uns ave		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	n na na sain	Delet	NAME	ADDRESS		ANTERNA DE PROPERTO		Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delet	NAME	ADDRESS T-ZIP				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		, Delete	NAME	ADDRESS r-zip				Change	Addition
TITLE NAME STREET ADDRESS		- Deleti	NAME	ADDRESS				Change	Addition

limited liability company or the receiver or trustee empraying to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE