2003 LIMITED LIABILITY COMPANY

Aug 19, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT/(UBR DOCUMENT # L02000021312 07-28-2003 90069 001 ***110.00 1. Entity Name INFINITY CHARTER, LLC Principal Place of Business Malling Address 55054497 171 GUN CLUB ROAD 171 GUN CLUB ROAD ST. AUGUSTINE FL 32095 ST. AUGUSTINE FL 32095 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7: Name and Address of New Registered Agent - -6. Name and Address of Current Registered Agent -Name. HANNA, NANCY L Street Address (P.O. Box Number is Not Acceptable) 171 GUN CLUB ROAD ST. AUGUSTINE FL 32095 City 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 again 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 TIDE MGRM ☐ Delete TITLE ☐ Channe ☐ Addition Green, Alan V. NAME NAME 4348 Southpoint Blod., Suite 230 CR2E083 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32216 CITY-ST-71P Change TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition TITLE Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME 1, ! e STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP

11. I hereby certify 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.

<u> DEUTHSED</u>

SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #

Attachment



55004497 #LD2000021312

August 15, 2003

Division of Corporations P. O. Box 6478 Tallahassee, FL 32314

Re: Infinity Charter, LLC

Reference No. L02000021312

Dear Sir or Madam:

Enclosed is the corrected UBR form on the above-referenced business. If you need anything else, please let me know.

Sincerely,

INFINITY CHARTER, LLC

Anne G. Lara

Enclosures/2

Enchoses: Is the connection UBR form as the characteristic cosiness. If $y = e^{-x} d + y + c d = y + c d$

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