

FILED
Sep 11, 2003 8:00 am
Secretary of State

08-04-2003 90097 007 ****50.00

2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # L02000021341			
1. Entity Name LITERARY KARATE, LLC			
Principal Place of Business 9409 SOUTHWEST 47TH LANE GAINESVILLE FL 32608		Mailing Address 9409 SOUTHWEST 47TH LANE GAINESVILLE FL 32608	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FBI Number		Applied For ☒ Not Applicable	
5. Certificate of Status Desired		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent THOBURN, ROBERT 9409 SOUTHWEST 47TH LANE GAINESVILLE FL 32608		7. Name and Address of New Registered Agent 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 _____ (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 NAME STREET ADDRESS CITY- ST- ZIP	☐ 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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TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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 REQUIRED		Date: 7/21/03 Daytime Phone: 352-219-7320	