998-359-0609 Daytime Phone #

10-3|-03 Date

20 UN	IFORM BUSINE	SS REPORT	JPANY JUBR)₌	7537		FILEO	.5.	i	
1. Entity Name	DICATES LLC	23214 203-2004			SEC DIVISI 04	RETARY OF COP	PORATIONS		
	BLVD	Mailing Address 5270 MILLENIA BLVD 306 ORLANDO FL 32839-5637 US 3. Mailing Address JOH WARM SPRINGS CT.							
	Suite, Apt. #, etc. City & State KISSI MHEE FL County 34743 County County County City & State KISSI MM EE Zig 34743			4. FEI Number C5-05-30-8 Country 5. Certificate of Status Des					
6. Name and Address of Current Registered Agent COLON, WILLIAM SR 15270 MILLENIA BLVD 306 ORLANDO FL 32839				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 104 WAR 11 SPR/NGS CT					
, the obligati	named entity submits this statement for ions of registered agent. Signature, typed or printed name of registered agent.	lan 5			ent, or both, in the		FL Zin Cod . I am familiar with, J9/04	43-6143 and accept	
		Make Check Payable	VIII FEE IS \$ to Florida Dep eptember 24,	partment of	State				
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER LLC MEMBER NILLIAM COLON S.R. NG 104 NARM SPRING KISSIMMEE FL	-Rm Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	4740 K		ADDITIONS/CHA MGR M ET APT 7 CA	•••	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP) Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(•	25081 61654-81	Change 3825 18**50.00	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	LLC MEMBER MG KEVIN BRETT, 170 TOWN SHIPLINE R HILLSBOROUGH, NIT	ь # 0-7 -08844:	TITLE NAME STREET ADDRESS CITY_ST_ZIP TITLE	47-	500c 12/01/03-	2508 -010110	☐ Change ☐ Change ☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZIP	REINSTATEME	2004	NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete de s	NAME STREET ADDRESS CITY-ST-ZIP			•	☐ Change	Addition	
l indicatéd	certify that the information supplied with i on this report is true and accurate and ability company or the receiver or truste	that my signature shall have the	e same legal effe	ect as if made u	inder oath; that I	am a managing	ther certify that the i member or manage	nformation er of the	