# LIMITED LIABILITY COMPANY
# UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Jan 28, 2003 8:00 am**
**Secretary of State**
01-28-2003 90047 034 ***150.00

DOCUMENT # L02000023592

1. Entity Name
United Citrus Marketing, LLC

20019017

**DO NOT WRITE IN THIS SPACE**

DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 4310 77th Street | P.O. Box 118 |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State: Wabasso, FL | City & State: Wabasso, FL |
| Zip: 32970 Country: USA | Zip: 32970 Country: USA |

4. FEI Number: No Employees — ☐ Applied For ☑ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name: Kenneth P. Kennedy

Street Address (P.O. Box Number is Not Acceptable): 4310 77th Street

City: Wabasso **FL** Zip Code: 32970

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: N/A — Kenneth P. Kennedy, President — DATE
Signature, typed or printed name of registered agent and title if applicable.

**FEE IS $50.00**
**Make Check Payable to Florida Department of State**
**DUE BY MAY 1**

9. MANAGING MEMBERS / MANAGERS

| | | | |
|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D,P<br>Kenneth P. Kennedy<br>4310 77th St. Wabasso, FL 32970 | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D,V,S<br>Thomas P. Kennedy<br>4310 77th St. Wabasso, FL 32970 | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | |
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CR2E083B (12/02)

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: Kenneth P. Kennedy — 772-589-4387
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #