2003 LIMITED LIABILITY COMPANY

Mailing Address

LARGO FL 33770

3. Mailing Address

433 BUTTONWOOD LANE

UNIFORM BUSINESS REPORT (UBR) DOCUMENT # L02000024240

LARGO FL 33770

Principal Place of Business

2. Principal Place of Business

433 BUTTONWOOD LANE

M & R IMPORTS & EXPORTS, LLC



FILED Feb 05, 2003 8:00 am Secretary of State

02-05-2003 90035 035 ****55.00

20023512



M CHECK HERE IF MAKING CHANGES

Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Nümber Applied For X Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RONALL BOGGS, RONALD J

433 BUTTONWOOD LANE LARGO FL 33770

ature, typed or printed name of registered ag

Street Address (P.O. Box Number is Not Acceptable)

BuTTON Wood

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 (NOTE: Registered Agent signature required when reinstating) SIGNATURE

> FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State

trand title if applicable.

Due By May 1, 2003 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES M.G.R.M. TITLE ☐ Delete ☐ Change Addition Michale G.6500 NAME NAME STREET ADDRESS STREET ADDRESS 111 Live OAK LANE 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-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-7IP ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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.