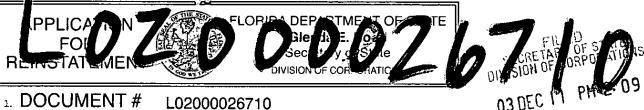
PLEASE REQUALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



Name and Mailing Address

0012567 01 AT 0.292 **AUTO T6 0 0615 33458-790825 CLUB CONCEPTS, LLC 1851 W INDIANTOWN RD., STE 100 JUPITER FL 33458-7908

M12/19

4. State/Country of Formation



			· · · - ·		<u> </u>			
City, State, Zip					Date Organized or Qualified To Do Business in Florida 10/09/2002			
Principal Place of Business 1851 W INDIANTOWN RD., STE 100 JUPITER FL 33458					6. FEI Number Applied For 55-0798952 0606/2 Not Applicable			
	FIIEN PL 33430	City, State, Zip			7. CERTIFICATE OF STATUS DESIRED 55.00 Additional Fee required for a Certificate of Status			
8. Name and Address of Current Registered Agent					Name and Address of New Registered Agent			
SANFORD, JOHN S					Street Address (P.O. Box Number is Not Acceptable)			
a a				City FL Zip Code				
10 . I, bein	ig appointed the ra 💮 . 💮 🚎 🔊	발 ^{**} 고 다 # .	ility compay,	am far iliar with an	nd actipt the obl	igations of Chapter 608,	F.S.	
Signature of Registered			ENT MUST SIGN		"MGRA	(" Date _/O/	30/03	
11Names	and Street Addreach Managing	Member/Mana	ger					
Title(s)	Name of Managing Members/Managers			eet Address of Each ging Member/Manager		City / State / Zip		
NGRA	MARK BENNET		1851 W Po40	. INDIAN	Tour	JupitER,	FI 33458	
MGRM	JOHN SANFORI)	1851.W.	TND/ATE	لرده	Jupiter	FL 33458 e, FL 33458	
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•		~ A 2 ***	2003		, il 1 ""			
i	REINSTATEM				11/03/	902437 3 030105801	3 **150.00	
		- N. T.	. A S. B. Alexandricherte das seed stational					
	that I am managing member/manager or							

all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Managing Member/Manage