

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 28, 2003 8:00 am**  
**Secretary of State**

03-28-2003 90005 004 \*\*\*\*50.00

DOCUMENT # L02000031957

1. Entity Name



IDEAWARE, L.L.C.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

1301 South Orlando Ave

3. Mailing Address

1301 South Orlando Ave

Suite, Apt. #, etc.

Suite B

Suite, Apt. #, etc.

Suite B

City & State

Cocoa Beach FL

City & State

Cocoa Beach FL

Zip

32931

Country

USA

Zip

32931

Country

USA

4. FEI Number

03-0496445

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

David Miller

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

1301 South Orlando Ave

Suite B

City

Cocoa Beach

FL

Zip Code

32931

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

Signature, typed or printed name of registered agent and title if applicable.

DAVID MILLER

3-27-03

DATE

**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

President-Manager  
David Miller  
1301 S. Orlando Ave Suite B  
Cocoa Beach FL 32931

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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IN THIS SPACE**

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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3-27-03

321.783.1691

Date

Daytime Phone #

CR2E083B (12/02)