LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000032170

1. Entity Name



FILED Apr 28, 2003 8:00 am Secretary of State 04-28-2003 91001 048 ****50.00

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	named entity submits this statement for	the pur	pose of changing its re	egistered	office or re	gistere	d agent, or both, in the	e State of FI	<u> </u>	iliar wit	h, and accept	t
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	ertify that the information supplied with	his filing	does not qualify for th	多知识的		in Sec	tion 119 07/3\(i), Flori	da Statutes	Lifurther certify	that th	e information	THE !
indicated o	ertify that the information supplied with to on this report is true and accurate and to lifty company or the receiver or trustee.	hat my s	signature shall have the	same le	egal effect a	as if ma	ade under oath; that I	am a mana	ging member o	or mana	ger of the	

R, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #