

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

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

02-19-2003 90002 003 ****50.00

DOCUMENT # L02000032312

1. Entity Name

SOUTHERN GLEN, LLC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

317 Centre St.

Suite, Apt. #, etc.

3. Mailing Address

317 Centre St.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

FERNANDINA BEACH FL

City & State

FERNANDINA BEACH FL

4. FEI Number

59-3762666

Applied For

Not Applicable

Zip

32034

Country

FLASSA

Zip

32034

Country

FLASSA

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Motolaw, Inc.

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

50 N. Laura St.

Suite 2500

City

Jacksonville

FL

Zip Code

32202

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 fee if applicable.

DATE

IFEE 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
WILLIAM J. MOCK, JR. MGRM
317 Centre St.
FERNANDINA BEACH FL
32034

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
President

TITLE
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STREET ADDRESS
CITY- ST- ZIP

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**DO NOT WRITE
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 606, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #

2/12/03

CR2E083B (12/02)



Attachment

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 18, 2003

SOUTHERN GLEN, LLC
317 CENTRE STREET
FERNANDINA BEACH, FL 32034

SUBJECT: SOUTHERN GLEN, LLC
Ref. Number: L02000032312

58020311

We have received your document for SOUTHERN GLEN, LLC. However, the document has not been filed and is being returned for the following:

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

*has
not
been
changed*

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed on the report form.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Registration/Qualification Section
Division of Corporations Letter Number: 903A00016681