## **2005 LIMITED LIABILITY COMPANY**

## **FILED** Mar 14, 2005 08:00 AM Secretary of State

| DOCUMENT # L02000032723  1. Enlity Name RAPID BLUEPRINT COMPANY, L.L.C.  |  |  |  |  |
|--|--|--|--|--|
| Principal Place of Business<br>2774 SYDELLE STREET<br>SARASOTA, FL 34237 | Mailing Address 2774 SYDELLE STREET SARASOTA, FL 34237 |  |  |  |
|  |  |  |  |  |



## DO NOT WRITE IN THIS SPACE

01132005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-0710686 Not Applicable 

5. Certificate of Status Desired

\$5.00 Additional Fee Required

CHAPNICK, BRUCE P ICARD,MERRILL,CULLIS,TIMM,FUREN & GINSBURG 2033 MAIN STREET STE. 600 SARASOTA, FL 34237

SIGNATURE:

6. Name and Address of Current Registered Agent

## DO NOT WRITE IN THIS SPACE

| <ol> <li>Inelabove 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.</li> </ol>  |  |  |   |  |
|---|--|--|---|--|
| SIGNATURE   | Signature, typed or printed name of registered egent and title it applicable | (NOTE: Registered Agent signature required when reinstating) | DATE                                      |  |
| Filing Fee is \$50.00<br>Due by May 1, 2005   |  |  |   |  |
| 9.  | MANAGING MEMBERS/MANAGERS  |  |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | MGR ZAMETZ, CHRIS F 2774 SYDELLE STREET SARASOTA, FL 34237                   | · ·  | U00000263397                              |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |  |  | UDD0000263397<br>03/14/05-80094-004 50.00 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |  | DO   | NOT WRITE                                 |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  | IN '   | THIS SPACE                                |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  |  |  |   |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | 1  |  |   |  |
| 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 cath; that I am a managing member or manager of the limited liability company or the receiver or trustee empty and to execute this report as required by Chapter 608, Florida Statutes. |  |  |   |  |

(HRIS F ZAMET

PED OR PRINTED NAME SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE