

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

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90023 020 ****50.00

DOCUMENT # L02000034872

1. Entity Name

REEL TIME ENTERTAINMENT II, LLC



DO NOT WRITE IN THIS SPACE

30052409

2. Principal Place of Business

3. Mailing Address

Same as block 2

Suite, Apt. #, etc.

324 Orange Tree Dr., Apt 4A

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Atlanta, Florida

City & State

4. FEI Number

13-4246074

Applied For

Not Applicable

Zip

33462

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Carter Andrews

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

324 Orange Tree Dr. Apt 4A

City

Atlanta

FL

Zip Code

33462

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

Carter Andrews

4/8/03

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

Manager

Carter Andrews

324 Orange Tree Dr. Apt 4A

Atlanta, FL 33462

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

Member

Heidi Andrews

324 Orange Tree Dr. Apt 4A

Atlanta, FL 33462

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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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 608, Florida Statutes.

SIGNATURE

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

Carter Andrews
Carter Andrews

4/8/03

Date

561-704-2064

Daytime Phone #

CR2E083B (12/02)