20	07 LIMITED LIA ANNUAI	BILITY COMPA	NY	FILED May 17, 2007 8:00 am Secretary of State
DOCUMENT # L0300008563 1. Entity Name 50 SOUTH YONGE, LLC				05-17-2007 90174 003 ****50.00
Principal Place of Business Mailing Address 8 WATERFRONT COURT 8 WATERFRONT COURT ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174			· · ·	
DO NOT WRITE IN THIS SPACE				Image: Second status Image: Se
8 WATERF	6. Name and Address of Current RANDALL L RONT COURT 3EACH, FL 32174	Registered Agent		DO NOT WRITE IN THIS SPACE
the obligation	named entity submits this statement f ons of registered agent. Honature, typed or printed name of registered agen ing Fee Is \$50.00 e by May 1, 2007		red office or register	red agent, or both, in the State of Florida. I am familiar with, and accept Jwhen reinstaling) DATE
9. TITLE NAME STREET ADDRESS CITY - ST - ZIP	MANAGING MEMB MGRM HENDRIX, RANDALL L 8 WATERFRONT CT ORMOND BEACH, FL 32174	ERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGEM HENDRIX ZOEA SWATERFRONT CT CRMOND BEACH	FC 32174	-	
NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP			-	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			-	
indicated	on this report is true and accurate a	ith this filing does not qualify for the nd that my signature shall have the s tee empowered to execute this repor	ame legal effect as	ed in Chapter 119, Florida Statutes. I further certify that the information if made under oath; that I am a managing member or manager of the apter 608, Florida Statutes.
SIGNAT		OF SIGNING MANAGING MEMBER, OF AUTHOR		4-30-07 386-451-4018 Date Dayture Phone #