

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 07, 2006 8:00 am
Secretary of State

03-27-2006 90050 015 ****50.00

DOCUMENT # L03000015151

1. Entity Name
NOYBI, LLC



Principal Place of Business
1504 VISTA LAGO BLVD.
PALM HARBOR, FL 34685

Mailing Address
301 CROSSWINDS DR
PALM HARBOR, FL 34683

DO NOT WRITE IN THIS SPACE



03162006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
56-2358301

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent:

SHANE, LARA G
301 CROSSWINDS DRIVE
PALM HARBOR, FL 34683

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IN THIS SPACE**

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 title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
SHANE, LARA
301 CROSSWINDS DR
PALM HARBOR, FL 34683

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #