

FILED
Jul 15, 2004 8:00 am
Secretary of State

14025689

DOCUMENT # L03000039456				Secretary of State 07-15-2004 90049 012 ****50.00	
1. Entity Name CLEARWATER, LLC.					
Principal Place of Business 199 REGATTA DRIVE JUPITER, FL 33477 US		Mailing Address 199 REGATTA DRIVE JUPITER, FL 33477 US		14025689	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07092004 Chg-LLC CR2E083 (10/03)	
City & State		City & State		4. FEI Number 20-0302291	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent NEVSIMAL, GUSTAV 199 REGATTA DRIVE JUPITER, FL 33477				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 <i>Gustav Nevsimal</i> (NOTE: Registered Agent signature required when reinstating) DATE 7/11/04					
Filing Fee is \$50.00 Due by September 8, 2004		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
MGR NEVSIMAL, GUSTAV 199 REGATTA DRIVE JUPITER, FL 33477					
<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: <i>Gustav Nevsimal</i> DATE 7/11/04					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					