

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

FILED
Mar 18, 2005 8:00 am
Secretary of State

02-15-2005 90049 001 ****50.00

DOCUMENT # <i>L030000 48354</i>	
1. Entity Name <i>Jim Cook LLC</i>	

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business <i>1108 NW CR 235</i>	3. Mailing Address <i>PO 626</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <i>NEW BERRY FL</i>	City & State <i>NEW BERRY FL</i>
Zip <i>32669</i>	Zip <i>32669</i>
Country <i>ALACHUA</i>	Country <i>ALACHUA</i>

4. FEI Number <i>20-0403409</i>	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required
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7. Name and Address of Current Registered Agent	
Name <i>Jim Cook</i>	
Street Address (P.O. Box Number is Not Acceptable) <i>1108 N.W. CR 235</i>	
City <i>NEW BERRY</i>	FL Zip Code <i>32669</i>

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY MAY 1
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9. MANAGING MEMBERS / MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>OWNER - MANAGING MEMBER</i> <i>Jim Cook</i> <i>1108 NW CR 235</i> <i>NEW BERRY FL 32669</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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: *James L Cook* *2-11-05* *352-538-5358*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083B (12/02)