

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

FILED
Mar 29, 2004 8:00 am
Secretary of State

03-29-2004 90555 019 ****55.00

DOCUMENT # 603000051133

1. Entity Name

Greg Veltkamp Specialties, LLC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1234 NW 35th Ave
Suite, Apt. #, etc.

3. Mailing Address

1234 NW 35th Ave
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Gainesville, FL

City & State

Gainesville, FL

4. FEI Number

81-0589116

Applied For

Not Applicable

Zip

32609

Country

USA

Zip

32609

Country

USA

5. Certificate of Status Desired

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**\$5.00 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Greg R Veltkamp

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

1234 NW 35th Ave

City

Gainesville

FL

Zip Code

32609

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.

DATE

FEE IS \$50.00

**Make Check Payable to Florida Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE	owner / manager	TITLE	
NAME	Greg Veltkamp	NAME	
STREET ADDRESS	1234 NW 35th Ave	STREET ADDRESS	
CITY-ST-ZIP	Gainesville, FL 32609	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
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TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

**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]

CR20043R 112002