2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

| ANNUAL REPORT | | | | | | | F | ₹ . | | |
|---|----------------------------------|---------------------------------|--|---|---|----------------------|---|------------------------------|---------------------------|-------------------------|
| DOCUMENT # L03000052860 1. Entity Name JOE ZUK LC | | | | | | | O7 AUG SECKE IA TALLAHAS | 23 PM | 3:45 | |
| Principal Place of Business Mailing Address | | | | | | 7 | TILL AHAM | hY_{III} | טי | |
| 3403 GALLANT FOX TRL | | | 3403 GALLANT FOX TRL | | | | 745 | Srevic | 5/1000 | |
| TALLAHASSEE, FL 32309 US | | | TALLAHASSEE, FL 32309 US | | | | | - CIFI | ORIGE | |
| INCLINIOSEL, IE SESOS do | | | TALLAHADDLE, TE 32303 US | | | | II aripa aikik at iik ar iik ar | IN COLOR D ANG JI | | IIII 111 1 11 11 |
| 2. Principal Place of Business - No P.O. Box # | | | 3. Mailing Address BK | | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | 08232007 | Chg-LLC | CR2E | 083 (12/06) | |
| City & State | | | City & State | | 4. FEI Numb | per PPLICABLE | | | plied For t Applicable | |
| Zip | Country | | Zip Country | | try | 5. Certificate | e of Status Desired | | \$5.00 Add Fee Require | |
| | 6. Name | and Address of Current | Registered Agent | | Name | 7. Name an | d Address of New F | Registered . | Agent | · |
| | | | | | | | | | | |
| ZUK, JOSEPH V 3403 GALLANT FOX TRL. | | | Street Address | | (P.O. Box Numb | er is Not Acceptable | e) | | | |
| TALLAHASSEE, FL 32309 | | | | | * | | | | | |
| | | | | | City | | | FL | Zip Code | 9 |
| 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 tifle if applicable. (NOTE: Registered Agent algorithms required when reinstating) DATE | | | | | | | | | | |
| Fil Due l | ling Fee is by Septen | s \$50.00 nber 14, 2007 | | ВК | | | | e check p a Departm | ayable to ent of State | |
| 9. | | MANAGING MEMBI | ERS/MANAGERS | 10. | | | ADDITIONS. | /CHANGES | <u> </u> | |
| TITLE | MGR | | ☐ Delete | TITLE | : | | | | ☐ Change | Addition |
| NAME | ZUK, JOE | | Devote | NAM | | | | | _ , | _ |
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| Street address | | | ☐ Delete☐ Delete☐ Delete☐ Delete☐ | NAM STRE | ET ADORESS -ST-ZIP | | | | ☐ Change | ☐ Addition |
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