LIMITED LIABILITY COMPANY UNIFORM BUSINES REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPEOOR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

DOCUMENT # 104000005076

JAMES B. EDGLEY, LLC

1. Entity Name



FILED Apr 11, 2005 8:00 am Secretary of State 04-11-2005 90044 046 ****50.00

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; ï	DO NOT WRIT	E IN THIS	SPACE	000000	
2. Principal Place of Business		3. Mailing Address Same		20028405	
Suite, Apt #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State Lake City, Florida		City & State		4. FEI Number 20-0619578	Applied For Not Applicable
Zip 32025	Country US	Zip	Country		\$5.00 Additional Fee Required
			Name	7. Name and Address of Current Reg	istered Agent
	DO NOT V	VRITE 🗀		ilyn J. Edgley (P.O. Box Number is Not Acceptable)	<u> </u>
	IN THIS S	PACE		, , , , , , , , , , , , , , , , , , , ,	
		1 AUL	191 City	S W Tempy Place	Ast 102 Zip Code
8 The above	named entity submits this statement	for the purpose of chan		te City ered agent, or both, in the State of Florida.	Lam familiar with and accept
	ions of registered agent.	3 01	Q.	5/20/x	Ú
SIGNATURE	Signature, lyged or printed name of registered ag	ent and tate if applicable	7	3/20/20	DATE
			FEE IS \$50.00		
ŕ	· ·	Make Check	Payable to Florida Departm DUE BY MAY 1	nent of State	
9.	MANAGING MEM	BERS/MANAGERS			
TITLE	Managing Member	•	TITLE		
James B. Edgley STREET ADDRESS 600 SE Country Club Road		1. n 1	NAME STREET ADDRESS		
CITY-ST-ZIP	Lake City, Florida		CITY-ST-ZIP		
TITLE	hake CILY, Piorius		TITLE		
NAME			NAME		
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STREET ADDRESS I			CITY-ST-ZIP		
****	Legality that the information supplied w	with this filing does not a	<u></u>	Section 119.07(3)(i), Florida Statutes. I furth	ner certify that the information
hoteoibaí	on this report is true and accurate a bility company or the receiver or trus	nd that my signature sha	II have the same legal effect as if	f made under oath: that I am a managing i	member or manager of the