LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # LO4060011114

1. Entity Name
MARK A TAYLOT LLC



FILED May 02, 2005 8:00 am Secretary of State

05-02-2005 90107 011 ****50.00

Daytime Phone #

Date

20052490

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| 2. Principal Place of Business 670 ARCHER CT | | | | 3. Mailing Address 670 Archer CA | | | | | | | | | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | DO NOT WRITE IN THIS SPACE | | | | | |
| DELAND FL. | | | | Delan | 1 | 4. | 4. FEI Number | | | × | Applied For Not Applicable | | |
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| | | | 7. Name and Address of Current Registered Agent | | | | | | | | | | |
| DO NOT WRITE | | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| IN THIS SPACE | | | | | | 670 | treet Address (P.O. Box Number Is Not Acceptable) | | | | | | |
| | | | | | | City | elar | 9 | | FI | L 32 | Code | |
| | named entity ions of registe | | ment for th | ne purpose of changing | g its registere | ed office or re | egistered ag | ent, or bo | oth, in the State of | of Florida. I am | familiar v | vith, and accept | |
| SIGNATURE - | Signature, typed | or printed name of register | ed agent and | title if applicable. | ्व अस्त सम्बद्ध सम्बद्ध सम्बद्ध | | · · · · · · · · · · · · · · · · · · · | in consultation of | | DATE | | | |
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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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE