Limited liability company Uniform Business Report (UBR)

DÖCUMENT # L040000 27896



FILED May 11, 2005 8:00 am Secretary of State 05-11-2005 90031 041 ****50.00

M #	ATT RISCH L	LC							
	DO NOT WRITE	IN THIS S	SPACE		20058515				
	lace of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRIT	TE IN THIS SE	PACE	
# 15 3 City & State		City & State			4. FEI Number Applied For				7
Tan	₽ I.	,					•	Not Applicable	1
Zip 32.3	Country Leon	Zip	Country		5. Certificati	e of Status Desired		5.00 Additional ee Required	
	·		Nor		7. Name and	Address of Current	Registered /	Agent	
	DO NOT W	DITE	Nam	Ma		Sc 17			
	in this si					er is Not Acceptable		3	-
			City	Tall.			FL	Zip Code 3230)	1
	named entity submits this statement fi ions of registered agent.	or the purpose of changing	its registered offic		ed agent, or bo	oth, in the State of Flo			1
SIGNATURE -	Signature, typed or printed name of registered agen	and title if applicable					DATE		
	1	Make Check Pay	FEE IS \$50.0 able to Florida DUE BY MAY	Departmen	nt of State				
9.	MANAGING MEMB	ERS/MANAGERS							1,
TITLE NAME	Matt RiscH		TITLE NAME						CR2E083B (12/02
STREET ADDRESS	410 Victory Garden	Or. #153	STREET ADORE	ESS					38
CITY-ST-ZIP	Tall. 61, 32301		CITY-ST-ZIP	_					E08
TITLE NAME			TITLE NAME						CR2
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TITLE			TITLE	 		·			-
NAME	}		NAME						
STREET ADDRESS CITY ST-ZIP			STREET ADDRE	ESS	D	O NOT	WRIT	E	
Title			TITLE		11	THIS S	SPAC	F	7
NAME STREET ADDRESS			NAME Street Addre	FSS		1 11110	<i>)</i> 1 7 9	· Battor	- Carrier and Carr
CITY ST-ZIP			CITY-ST-ZIP						
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TITLE NAME			TITLE NAME						
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CITY-ST-ZIP	<u> </u>		CITY-ST-ZIP			W. F. 11 6			4
indicated	certify that the information supplied will on this report is true and accurate and billity company or the receiver or truster.	d that my signature shall ha	ve the same legal	effect as if m	iade under oat	h; that I am a manag	i turther certit ging member	or manager of the	

SIGNATU	IRE:	

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

4-28-05

850 509-6465

Daytime Phone #