## 2007 LIMITED LIABILITY COMPANY

DOCUMENT # L04000046663

1. Entity Name

**BOOTH PARTNERS, LLC** 

Principal Place of Business

61 SAGO PALM ROAD VERO BEACH, FL 32963 Mailing Address

61 SAGO PALM ROAD VERO BEACH, FL 32963

## **FILED** Apr 05, 2007 08:00 Al Secretary of State



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04022007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1277714

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WEISE, FRANK E III 61 SAGO PALM ROAD VERO BEACH, FL 32963

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| the obligations of registered agent.   | inging its registered office of registered agent, or both, in the | state of Florida. Tam latimal with and | ассері |
|--|---|--|--------|
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable | (NOTE: Registered Agent signature required when reinstating)      | DATE                                   | _      |
| Filing Fee is \$50.00<br>Due by May 1, 2007  |   |  |        |

The above and active the trial trial exponent for the purpose of phonology is projected office or registered agent or both in the State of Florida. Lam familiar with and accept

| 9.   | MANAGING MEMBERS/MANAGERS  |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          | MGR<br>WEISE, FRANK E III<br>61 SAGO PALM ROAD<br>VERO BEACH, FL 32963 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |  |
| IIILE NAME STREET ADDRESS CITY-SI-ZIP          |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |  |
| IIILE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |  |

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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:

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

(772) 231-1672

Daytime Phone #