

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED** ATX1  
**Apr 24, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT #** *L05000026107*

1. Entity Name

**SUNBEAR HOME REPAIR LLC**

**DO NOT WRITE IN THIS SPACE**

*UD00000728474*  
*05/07/07-80018-025 50.00*

2. Principal Place of Business  
**51 NW 71ST AVE**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
**OCALA, FL**

City & State

4. FEI Number  
**54-2180849**

Applied For  
**Not Applicable**

Zip  
**34482-4457**

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name  
**MARY D MOSLEY**

Street Address (P.O. Box Number is Not Acceptable)  
**51 NW 71ST AVE**

City  
**OCALA**

**FL**

Zip Code  
**34482-4457**

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 *Mary D Mosley*

**OWNER**

**4/13/2007**

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FEE IS \$50.00**  
**Make Check Payable to Department of State**  
**DUE BY MAY 1**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
**MEMBER**  
NAME  
**LEROY MOSLEY**  
STREET ADDRESS  
**51 NW 71ST AVE**  
CITY-ST-ZIP  
**OCALA FL 34482**

TITLE  
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**DO NOT WRITE  
IN THIS SPACE**

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:** *Mary D Mosley*

**4/13/2007**

**3528619733**

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

Date

Daytime Phone #

CFR2083B (12/02)