

05-01-2006 90077 002 **** 50.00

DOCUMENT # L05000037601



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1. Entity Nam PEW LAN	e ID MANAGEMENT, LLC						SECRETAR TALLAPASS	Y O	F STATE	
Principal Place	e of Business	Mailing Address		·	1		MULCH FOR	71.1.	,OI 11 0 ;	
2081 SE OCE	EAN BLVD.	GUY & YUDIN, LLP	GUY & YUDIN, LLP							
SUITE 2B STUART, FL	34994	55 EAST OCEAN BLVD. Stuart, FL 34994			L MATTER AN	LUIS DAN ABIN ABIN ABIN	. 	ings green	ri en rieki	
2. Principal Place of Business		3. Mailing Address			-					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03042006	Chg-LLC	CR2E083 (11	/05)		
City & State		City & State			20-30	11417			ied For Applicable	
Zip	Country	Zip .	Country		5. Certificate	of Status Desired	□ \$5.00 Fee Re		onal	
	6. Name and Address of Curre	nt Registered Agent	egistered Agent Name			7. Name and Address of New Registered Agent				
YUDIN, JOHN S ESQ.										
55 EAST C STUART, I	DCEAN BLVD. FL		Street Addre			a (P.O. Box Number is Not Acceptable)				
.: •				City			FL Zip	Code		
The above named entity submits this statement for the purpose of changing its registrenges.				ed office or registe	ered agent, or bot	h, in the State of Flo		with, a	nd accept	
the obligations of registered agent. SIGNATURE										
	Signature, typed or printed name of registered age	ont and title if applicable (NOT)	E: Registers	KI Agent signature require	ed when rematating)		DATE			
	iling Fee is \$50.00 ue by May 1, 2006				Make check payable to Florida Department of State					
9.	,	BERS/MANAGERS	10.	, , ,		ADDITIONS	CHANGES			
TITLE NAME	MGRM WEINBERG, EDWARD	☐ Detete	TITU NAM	-			□ ch	ange	☐ Addition	
STREET ADDRESS	2081 SE OCEAN BLVD.			EET ADOPESS					1	
CITY-ST-ZIP	STUART, FL 34994		ату	1-S1-ZIP						
INTE	MGRM	☐ Delete	m				_ ch	enge	Addition	
NAME STREET ADORESS	PROCTOR, BRIAN		NAM	-						
CITY-ST-ZIP	2081 SE OCEAN BLVD. STUART, FL 34994			EET ADORESS (-ST-ZIP					1	
TITLE	MGRM	☐ Delete	mı	£			□ ch	sude	☐ Addition	
NAME	EZZO, PAUL		NAM							
STREET ADDRESS CITY-ST-ZIP	2081 SE OCEAN BLVD.			EET AOORESS (+ST+ZIP						
TITLE	STUART, FL 34994	☐ Delete	TITU						☐ Addition	
NAME		C Pents	NAM	1				o ye	C ALLENA	
STREET ADDRESS			ŠTR	EET ADDRESS						
CITY-ST-ZP			CITY	1-ST-ZIP						
TITLE		☐ Deleta	TML	- 1			Λ □ Ch	angen	☐ Addition	
NAME STREET ADDRESS	ا ا		NAM STRI	EET ADDRESS			- Aith	\mathcal{L}	/	
CITY-ST-ZIP				(-ST-ZP			MIN		\	
ITTLE		☐ Delate	TAL			-	, Ntb g	enge)	Addition	
NAME			NASA				~ ()\Y\			
STREET ADDRESS				ET ADDRESS (-ST-ZIP			\bigcirc V			
CITY-ST-ZF	Cortily that the information symplical is	ith this filing does not a cath to			d in Charter 110	Florida Statutae 16	idher Certify that th	w infor-	nation	
11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Rorida 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.										