


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

FILED
07 APR -2 PM 2:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| | |
|--|---|
| DOCUMENT # L06000038634 1. Entity Name KOINONIA, LLC |  |
|--|---|

DO NOT WRITE IN THIS SPACE

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|---|---|
| 2. Principal Place of Business 3122 E. Pebble Creek Drive Suite, Apt. #, etc. | 3. Mailing Address 3122 E. Pebble Creek Drive Suite, Apt. #, etc. |
|---|---|

BSK

DO NOT WRITE IN THIS SPACE

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|------------------------------------|------------------------------------|-----------------------------|--|
| City & State Avon Park, Florida | City & State Avon Park, Florida | 4. FEI Number 20-4760659 | Applied For <input type="checkbox"/> Not Applicable |
| Zip 33825 | Country | Zip 33825 | 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 Spiegel & Utrera, P.A. | |
| | Street Address (P.O. Box Number is Not Acceptable) 1840 Coral Way, 4th Floor | |
| | City Miami | FL Zip Code 33145 |

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

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

| 9. MANAGING MEMBERS/MANAGERS | | | |
|--|---|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR Pansino, Frank 3122 E. Pebble Creek Drive Avon Park, Florida 33825 | TITLE NAME STREET ADDRESS CITY - ST - ZIP | 300095998193 04/06/07--01041--002 **50.00 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | ST Pansino, Frank 3122 E. Pebble Creek Drive Avon Park, Florida 33825 | TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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CR2E083B (12/02)

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 *Frank Pansino* Frank Pansino, Manager 3/21/2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #