| | ANNUA ANNUA | | | | | | 748 |
|--|--|---|--|---|----------------------------|---|---|
| | MENT # L0700002 | 4042 🐧 | | | | EC. | 85 |
| Entity Nan UST-A-I | BOW LLC | | | | | | 夏四 |
| | | | 1 | | | S-3- | 1 -4 1 -4 1 - E |
| Incipal Plac | ce of Business | Malling Address | | | | | Fir |
| 310 LENO | | 5310 LENOX AVE. | | 1 | | 1 149 111 149 | |
| VITE 13 ICKSONVIL | LE, FL 32205 | SUITE 13 IACKSONVILLE, FL | 32205 | | • | <u> </u> | |
| . Principal I | Place of Business - No P.O. Box # | 3. Mailing Address | | - | | 19 | + 5 |
| Suite, Apt | . e. etc. | Suite, Apt. #, etc. | | | | | |
| City & Sta | | City & State | | 07102008 | | CR2E083 (| (12/06) Applied Fo |
| Zip | Country | Zip | Country | | 33-115 | | Not Applic |
| Z-IP | | | Codingy | 5, Certifica | te of Status Desired | | .00 Additional Required |
| | 6. Name and Address of Curre | nt Registered Agent | Name | 7. Name at | nd Address of New | Registered Ager | nt |
| | ITTLETON, SAUNDRA YOU ISTIDES WAY | NG | Street | Address (P.O. Box Num | ber is Not Acceptab | le) | |
| | IVILLE, FL 32218 | | | | | · | |
| | | | <u></u> | | | | Zip Code |
| | | | I City | | | | |
| The above | named entity submits this statement | for the purpose of changing | City | or registered agent, or b | ooth, in the State of F | F La | · <u> </u> |
| | e named entity submits this statement tlons of registered agent. | for the purpose of changing | | or registered agent, or b | ooth, in the State of F | F La | · <u> </u> |
| the obliga | | | its registered office of | or registered agent, or b | ooth, in the State of F | F La | · <u> </u> |
| the obliga | Signature, hybrid or privined name of registried ago | nt and little II applicable. (h | its registered office of | Mule required when reinstating) | | lorida. I am tamil | Ray with, and acc |
| the obliga GNATURE | tlons of registered agent. | in and like I applicable. (F | its registered office of | nure required when renessating) | Mai | lorida. I am famil | Rer with, and acc |
| the obligation of the obligati | Sometime, house or privated name of registered age. E NOWILL FEE IS \$138.75 by September 12, 2008 MANAGING MEM | in accordance will liability company | its registered office of NOTE: Registered Agent algorithms. 607.193(2)(b), did not receive the | F.S., the limited prior notice. | Ma Florid | DATE DATE DATE Re check payal to Department CHANGES | Ray with, and acco |
| THE OBLIGATIONS OF THE OBLIGATIO | tions of registered agent. Strake, hood or prived neme of registered age E NOWILL FEE IS \$138.75 by September 12, 2008 | in accordance will liability company | its registered office of the control | F.S., the limited prior notice. | Ma: Florid Additions | DATE DATE DATE Re check payal to Department CHANGES | Rer with, and acc |
| THE ADDRESS | 90man, hand a princh name of replaced agent. B NOWILL FEE IS \$138.75 by September 12, 2008 MANAGING MEM MGR DUNBAR, ISABELL J 833 TRAMBLEY DR. W. | in accordance will liability company | its registered office of MOTE: Programmed Agent signs this s. 607. 193(2)(b), did not receive the TITLE NAME STREET ADDRESS | F.S., the limited prior notice. MGR Kee 13 Jan | Mai Fiorid | DATE DATE DATE Re check payal to Department CHANGES | Ray with, and acco |
| the obliga | 90man, hand a princh name of registered agent. B NOWILL FEE IS \$138.75 by September 12, 2008 MANAGING MEM MGR DUNBAR, ISABELL J | in accordance will liability company | its registered office of NOTE: Registered Agent signs this s. 607.193(2)(b), did not receive the | F.S., the limited prior notice. MGR Kee 13 Jan | Ma: Florid Additions | DATE DATE ke check payal a Department | Ray with, and acco |
| THE OBLIGATION OF THE PROPERTY | BONNEL HORS OF PERSISTENCE OF PERSIS | in accordance will liability company SERS/MANAGERS | its registered office of MOTE: Registered office of MOTE: Registered Appendiques the STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME NAME | F.S., the limited prior notice. MGR Kee 13 Jan 5772 Rich | Mai Fiorid | DATE DATE ke check payal a Department | ble to of State |
| THE AME THE ADDRESS TTY-S1-2P | B NOWILL FEE IS \$138.75 by September 12, 2008 MANAGING MEM MGR DUNBAR, ISABELL J 833 TRAMBLEY DR. W. JACKSONVILLE, FL 32221 MGR HARMON, ANNETTE | in accordance will liability company SERS/MANAGERS | its registered office of MOTE: Programmed Agent signs this is 607, 193(2)(b), did not receive the TITLE NAME STREET ADDRESS CITY-ST-ZIP | F.S., the limited prior notice. MGR Kee 13 Jan 5772 Rich | Mai Fiorid | DATE DATE ke check payal a Department | ble to of State |
| THE ODINGS FIL DUG THE | BONNEN, hood o privad name of registred age. B NOWILL FEE IS \$138.75 B NOWILL FEE IS \$138.75 B MANAGING MEM MGR DUNBAR, ISABELL J 833 TRAMBLEY DR. W. JACKSONVILLE, FL 32221 MGR HARMON, ANNETTE 2839 KOHN RD | in accordance will liability company SERS/MANAGERS | It's registered office of MOTE: Registered office of MOTE: Registered Appendix signs the s. 607.193(2)(b), did not receive the HILL. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | F.S., the limited prior notice. MGR Kee 13 Jan 5772 Rich | Mai Fiorid | DATE DATE Re check payalla Department | ble to of State |
| THE ODIGATURE FIL DUE THE AME | BONNEN, hood o privad name of registred age. B NOWILL FEE IS \$138.75 B NOWILL FEE IS \$138.75 B MANAGING MEM MGR DUNBAR, ISABELL J 833 TRAMBLEY DR. W. JACKSONVILLE, FL 32221 MGR HARMON, ANNETTE 2839 KOHN RD | in accordance will liability company BERS/MANAGERS Deite | It's registered office of MOTE: Programed Agent agree the Street Agent agree the STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | F.S., the limited prior notice. MGR Kee 13 Jan 5772 Rich | Mai Fiorid | DATE DATE Re check payalla Department | ble to of State Change Add |
| THE ODIGONATURE FILL DUG THE AME THEET ADDRESS TITY-ST-ZP THEET ADDRESS TITY-ST-ZP | BONNEN, hood o privad name of registred age. B NOWILL FEE IS \$138.75 B NOWILL FEE IS \$138.75 B MANAGING MEM MGR DUNBAR, ISABELL J 833 TRAMBLEY DR. W. JACKSONVILLE, FL 32221 MGR HARMON, ANNETTE 2839 KOHN RD | in accordance will liability company BERS/MANAGERS Deite | It's registered office of MOTE: Registered office of MOTE: Registered Appendix signs the s. 607.193(2)(b), did not receive the HILL. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | F.S., the limited prior notice. MGR Kee 13 Jan 5772 Rich | Mai Fiorid | DATE DATE Re check payal a Department A/CHANGES | ble to of State Change Add Change Add |
| THE ODINGS FILL DUE FILL AME THEET ADDRESS TITY-ST-ZP TILE AME THEET ADDRESS TITY-ST-ZP TILE AME THEET ADDRESS TITY-ST-ZP TILE THEET ADDRESS TITY-ST-ZP TILE THEET ADDRESS TITY-ST-ZP TITLE THEET ADDRESS TITY-ST-ZP | BONNEN, hood o privad name of registred age. B NOWILL FEE IS \$138.75 B NOWILL FEE IS \$138.75 B MANAGING MEM MGR DUNBAR, ISABELL J 833 TRAMBLEY DR. W. JACKSONVILLE, FL 32221 MGR HARMON, ANNETTE 2839 KOHN RD | in accordance will liability company BERS/MANAGERS Deite | It's registered office of the control of the contro | F.S., the limited prior notice. MGR Kee 13 Jan 5772 Rich | Mai Fiorid | DATE DATE Re check payal a Department A/CHANGES | ble to of State Change Add |
| GNATURE FIL Due FIL | BONNEN, hood o privad name of registred age. B NOWILL FEE IS \$138.75 B NOWILL FEE IS \$138.75 B MANAGING MEM MGR DUNBAR, ISABELL J 833 TRAMBLEY DR. W. JACKSONVILLE, FL 32221 MGR HARMON, ANNETTE 2839 KOHN RD | In accordance will liability company BERS/MANAGERS Delete Delete | It's registered office of NOTE: Programmed Agent signs the S. 607. 193(2)(b), did not receive the TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS | F.S., the limited prior notice. MGR Kee 13 Jan 5772 Rich | Mai Fiorid | DATE DATE Re check payal a Department A/CHANGES | ble to of State Change Add Change Add |
| THE AME THEFT ADDRESS THY-S1-ZP TILE AME THEFT ADDRESS THY-S1-ZP | BONNEN, hood o privad name of registred age. B NOWILL FEE IS \$138.75 B NOWILL FEE IS \$138.75 B MANAGING MEM MGR DUNBAR, ISABELL J 833 TRAMBLEY DR. W. JACKSONVILLE, FL 32221 MGR HARMON, ANNETTE 2839 KOHN RD | In accordance will liability company BERS/MANAGERS Deide Deide | INTE: Programmed Agent signs INTE: Programmed Agent signs INTE: Programmed Agent signs INTE: Programmed Agent signs INTE: NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | F.S., the limited prior notice. MGR Kee 13 Jan 5772 Rich | Mai Fiorid | DATE ke check payalla Department I/CHANGES | ble to of State Change Add Change Add Change Add |
| THE ODIGATURE FIL. DUA FIL. DUA FIL. DUA FIL. DUA FIL. F | BONNEN, hood o privad name of registred age. B NOWILL FEE IS \$138.75 B NOWILL FEE IS \$138.75 B MANAGING MEM MGR DUNBAR, ISABELL J 833 TRAMBLEY DR. W. JACKSONVILLE, FL 32221 MGR HARMON, ANNETTE 2839 KOHN RD | In accordance will liability company BERS/MANAGERS Delete Delete | It's registered office of MOTE: Programed Agent algres the S. 607.193(2)(b), did not receive the TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | F.S., the limited prior notice. MGR Kee 13 Jan 5772 Rich | Mai Fiorid | DATE ke check payalla Department I/CHANGES | ble to of State Change Add Change Add |
| THE ODIGATURE FILL DUE FILL BET ADDRESS TY-S1-ZP TLE ME REET ADDRESS | BONNEN, hood o privad name of registred age. B NOWILL FEE IS \$138.75 B NOWILL FEE IS \$138.75 B MANAGING MEM MGR DUNBAR, ISABELL J 833 TRAMBLEY DR. W. JACKSONVILLE, FL 32221 MGR HARMON, ANNETTE 2839 KOHN RD | In accordance will liability company BERS/MANAGERS Deide Deide | It's registered office of NOTE: Programmed Agent signs the S. 607. 193(2)(b), did not receive the STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | F.S., the limited prior notice. MGR Kee 13 Jan 5772 Rich | Mai Fiorid | DATE ke check payalla Department I/CHANGES | ble to of State Change Add Change Add Change Add |
| THE ODINGS GNATURE FIL DUG FIL DUG FIL | BONNEN, hood o privad name of registred age. B NOWILL FEE IS \$138.75 B NOWILL FEE IS \$138.75 B MANAGING MEM MGR DUNBAR, ISABELL J 833 TRAMBLEY DR. W. JACKSONVILLE, FL 32221 MGR HARMON, ANNETTE 2839 KOHN RD | In accordance will liability company BERS/MANAGERS Deide Deide | INTE. Programed Agent signs th s. 607. 193(2)(b), did not receive the 10. ITTLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS | F.S., the limited prior notice. MGR Kee 13 Jan 5772 Rich | Mai Fiorid | lorida. I am tamil DATE ke check psysil a Department I/CHANGES | ble to of State Change Add Change Add Change Add |
| THE ODIGATURE FIL DUA FIL DUA FIL DUA THE ADDRESS TH'-51-2P THE AME THEFT ADDRESS TH'-51-2P THE AME THE AME THE ADDRESS | BONNEN, hood o privad name of registred age. B NOWILL FEE IS \$138.75 B NOWILL FEE IS \$138.75 B MANAGING MEM MGR DUNBAR, ISABELL J 833 TRAMBLEY DR. W. JACKSONVILLE, FL 32221 MGR HARMON, ANNETTE 2839 KOHN RD | In accordance will liability company BERS/MANAGERS Delete Delete Delete | INTE. Programed Agent algore This. 607. 193(2)(b), did not receive the 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP | F.S., the limited prior notice. MGR Kee 13 Jan 5772 Rich | Mai Fiorid | lorida. I am tamil DATE ke check psysil a Department I/CHANGES | ble to of State Change Add Change Add Change Add |

JUST-A-BOW FLORIST, LLC 5310 Lenox Ave., Ste 13 Jacksonville, FL 32205 904-394-0877

October 30, 2008

Ms. Nanette Causseaux Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314

Reference Number: L07000024042 PERSONAL AND CONFIDENTIAL

Ms. Causseaux:

Per our conversation today, enclosed for your review is the completed documentation required for our business. As stated, this was received without our Federal Identification Number (FEI) which was originally mailed to you with payment of \$138.75.

Also, we received the enclosed request dated September 12, 2008, indicating that we need to enter our Federal Identification Number (FEI). We completed this form with our Federal Identification Number (FEI) and were mailed out on September 16, 2008.

We are requesting that Just-A-Bow Florist LLC be reinstated due to submitting all the necessary forms as requested.

If additional information is needed, please advise.

Sincerely,

Isabell J. Dunbar

Annette P. Harmon

Dsalver Whenbac

James Keels

Owners