2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L9700000304 1. Entity Name CIRCLE L HOLDINGS, L.C.					SECRETARY UF STATE DIVISION OF CORPORATIONS OF MAR -3 AMII: 04				
Principal Place of Business Mailing Address							`	2017[1]	· 04
2801 FRUITVILLE RD SUITE 100 SARASOTA FL 34237		2801 FRUITVILLE RD SUITE 100 SARASOTA FL 34237-5336				101/06/11 11 18/4 1 1 8/4 18			
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc. Suite, Apt. #, 6		Suite, Apt. #, etc.	#, etc.		DO NOT WRITE IN THIS SPACE				
City & State		City & State			4. FEI Number 65-0736716 Applied For Not Applicable				
Zip	Country	Zip	Coun	try	5. Certifi	cate of Status Desire		\$5.00 Add	
	6. Name and Address of Current F	Registered Agent			7. Name	and Address of Ne			
Name									
HRIC, MICHAEL 2801 FRUITVILLE RD			,	Street Address	ess (P.O. Box Number is Not Acceptable)				
SUITE 100									
SARASOTA FL 34237				City			FL	Zip Code	•
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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
		FILE NO Make Check Pay		FEE IS \$50.00 Department (
9.	MANAGING MEMBE		10.	. 1		ADDITIO	NS/CHANGES	Change	Addition
TITLE MAME STREET ADDRESS CITY-ST-ZIP	MGRM Lynn, Jesse J 6907 River Birch Court Bradenton Fl	□ Deleta		į	TH	3116100)	C. Cusuffe	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LYNN, LARA A 6907 RIVER BIRCH COURT BRADENTON FL	□ Delete			7	60000: -03/3 ****	3179 22/0001 ++50.00	□ Champe 766- 10470 *****5	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delets						. Changt	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delata		1				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Deleta			<u>.</u>	· · · · · ·		Change	Addition
TITLE MAME STREET ADDRESS CITY-ST-ZIP		Dodets	I .					Change Change	Addition
indicatéd	ertify that the information supplied with on this report is true and accurate and to sility company or the receiver or trustee	that my signature shall have th	ie same	legal effect as if	made under	oath; that I am a ma	es. I further cert unaging member	ify that the in r or manage	formation r of the