2001 UNIFORM BUSINESS REPORT (UBR)

Number CREEK, LLC NIMAY -7 PM 5: 28 SECRETARY OF STATE TALLAHASSEE, FLORIDA SIGN NUMBER GREEK DAWE PUNTA GORDA FL 3982 Principal Place of Business Making Address Subs Apr. 4, abc. DO NOT WRITE IN THIS SPACE PUNTA GORDA FL 3982 PUNTA GORDA FL 3982 DO NOT WRITE IN THIS SPACE PUNTA GORDA FL 3982 DO NOT WRITE IN THIS SPACE PUNTA GORDA FL 3982 TO Country 5. Certificate of Business 6. Name and Address of Current Registered Agent INTER LEONETTE, JOHN Subser Address of Number is Not Acceptable) Subser Address of Number is Not Acceptable) Subser Address of Number is Not Acceptable) FLE N PUNTA GORDA FL 3392 City FL Zeo Code City FL Zeo Code SCHANURE PUNTA GORDA FL 3392 City FL Zeo Code SCHANURE PUNTA GORDA FL 3392 City FL Zeo Code SCHANURE TO Seat In this State of Florica. B. The above ramed entity submits this statement for the purpose of charging its explained after or registered agent, or both, in the State of Florica. SCHANURE PUNTA GORDA FL 3392 City FL Zeo Code City FL Name and Address of Number is Not Acceptable) City FL Zeo Code City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable) City FL Number address of Number is Not Acceptable	DOCUMENT # L9800000571								FILED		
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PINTA CORDA FL 3988 PINTA COR	Principal Place of Business Mailing Address								TALLAHASSEE, F	LORIDA	
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St. Country Zip Country Zip Country St. Certificate of Status Desired St. St	Suite, Apt. #, etc.			uite, Apt. #, etc.	```						
S. Name and Address of Current Registered Agent 1. Name	City & State			City & State			4. 1	FEI Nu	65-0859068	<u> </u>	
6. Name and Address of New Registered Agent Vame Serect Address (P.O. Box Number is Not Acceptable) Serect Address (P.O. Box Number is Not Acceptable) City FL Zio Code C	Zip Country			p	Coun	try	5. (Certific	cate of Status Desired		
Size Address (P.O. Box Number is Not Acceptable)		6. Name and Address of Curre	ent Registe	ered Agent			7. 1	Name	and Address of New Registere	<u> </u>	
1601 HUNTER CREEK DRIVE PUNTA GORDA FL 33982 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its agistered office or registered agent, or both, in the State of Florida. SIGNATURE	LEONETT	T IOUN					<u>.</u>		-	-	
PUNTA GORDA FL 33982 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its egistered office or registered agent, or both, in the State of Florida. SIGNATURE SIGN	•					Street Address (P.O. Box Number is Not Acceptable)					
A. The above named entity submits this statement for the purpose of changing its egistered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, location primate integrational agent and title if approximate. (NOT: Registered Agent supmature required when remaintaing) DATE											
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Signature typed or primate name of legistered agent and tire if applicable. (NOT) Registered agent applicable. (NOT) Registered	8. The above	named entity submits this statemer	t for the pu	rpose of changing its	egister	ed office or	registered ag	ent, or	r both, in the State of Florida.		
FILE N. W.!! FEE IS \$50.00 Make Check Pe abile to Department of State 9. MANAGING MEMBERS / MEMBERS 10. ADDITIONS / CHANGE Addition ***********************************	SIGNATURE .			(1)07/	B. sistem	- A	a required when re	inetation	DAT	F	
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