

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000002569
1. Entity Name
THE HONORABLE COMMON ENTITY LIMITED LIABILITY CO

Principal Place of Business **Mailing Address**
337 BUENAVENTURA BLVD **337 BUENAVENTURA BLVD**
KISSIMMEE FL 34743 **KISSIMMEE FL 34743**

2. Principal Place of Business **3. Mailing Address**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent

MALDONADO, FRANCISCO J
337 BUENAVENTURA BLVD
KISSIMMEE FL 34743

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 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 _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE **MGRM** ☐ Delete
NAME **MALDONADO, FRANCISCO J**

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS

FILED
01 JAN 16 AM 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

0023400 AF

(083 (11/00)

If the check submitted with this report is returned by a bank for any reason, the report will be cancelled and considered not filed. The Department of State will dissolve/revoke the entity if a replacement payment with service charge and report are not resubmitted within the prescribed time frame.

INFORMATION REGARDING RETURNED CHECK

Hearing/Voice Impaired may call (850) 487-6096 (TDD)
 Phone: (850) 487-6051

Registration Section
 409 E. Gaines Street
 Tallahassee, FL 32399

Tallahassee, FL 32314