			_	71 1 175 /\	HD	
2000 UNIFORM BUSINE	SS REPOR	RT (UBR	<u>'</u>	FI	LED	
DOCUMENT # L9800000	2764			ווו מו 21	PM 12: 49	
NEBWIZARD II, L.L.C.	7.	٠ ١				
				TALLATAS	RY OF STATE SEE, FLORIDA	
·	ing Address					
	Douglas Avenue. Sun Amonte springs fl 32					
			<u> </u>			
	ailing Address SAM.	a /·	<del></del> j   [			<b>                                      </b>
	uite Ant # etc 1	Suite 10	<u> </u>	DO NOT WRI	TE IN THIS SPACE	·
City & State Cit	ty & State	Just e re	4. FEI Nui	mber E0_0E400C4		Applied For
Zip Country Zip	<u> </u>	Country		59-3542961	\$5.00 A	Not Applicable
6. Name and Address of Current Register	red Agent	<del></del>		ate of Status Desired and Address of New F	Fee Requi	
	- Carrie	Name			- Carried Agent	
RAY, RANDALL 650 DOUGLAS AVENUE		Street Add	dress (P.O. Box Nur	oher is Not Acceptable	17	2
ALTAMONTE SPRINGS FL 32714						يە ي <del>ى ئ</del> ىرى
٠.		City			Zin Co	nde
. The above named entity submits this statement for the pur		ainternal office	enistered agent, or	900003	万9 <del>5</del> 595	
	pose or changing its rec	gistered office or n	- "viered affent" of	bett-in the State of Fr		01''
. The above flamed of any submitted this statement for the part	pose of changing its reg	gistered office av	25-49	-07/23	『76001079- にん 00 ****	
		egistered Agent signature		-07/23		-012 *50.00
SIGNATURE	pplicable. (NOTE: As		required when reinstating)	-07/23	50.00 ****	
IGNATURE	pplicable. (NOTE: As	egistered Agent signature	required when reinstating)	-07/23	50.00 ****	
SIGNATURE Signature, typed or printed name of registered agent and title if a MANAGING MEMBERS/ME	FILE NOW	egistered Agent signature	0.00 ent of State	ーリイ/と ******* ADDITIONS	DATE ****	*50.00
SIGNATURE Signature, typed or printed name of registered agent and title if a MANAGING MEMBERS/ME	FILE NOW	egistered Agent signature VIII FEE IS \$5 ble to Departm	0.00 ent of State	ADDITIONS	CHANGES Change	*50.00
SIGNATURE Signature, typed or printed name of registered agent and title if a management of the signature of	FILE NOW Make Check Payal	egistred Agent signature / III FEE IS \$5 ble to Departm  10. INTLE RAME STREET ADDRESS	0.00 ent of State  Avana (1490 C)	ADDITIONS, Communicantily Di	CHANGES CHANGES CHANGES CHANGES	*50.00
MANAGING MEMBERS/ME MANAGI	FILE NOW Make Check Payal	Pois Med Agent signature  / III FEE IS \$5 ble to Departm  10.  IITLE  NAME	0.00 ent of State  Avana (1490 C)	ADDITIONS	CHANGES CHANGES CHANGES CHANGES	*50.00
MANAGING MEMBERS/ME MEMBERS/MEMBERS/MEMBERS/MEMBERS/MEMBERS/MEMBER	FILE NOW Make Check Payal MBERS Delete	Poist Fee Agent signature  FILL FEE IS \$5  ble to Departm  10.  HITLE  HAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	0.00 ent of State  Avana (1490 C)	ADDITIONS, Communicantily Di	CHANGES  Ations Change  RIVE	*50.00
MANAGING MEMBERS/ME MEMBERS/MEMBERS/MEMBERS/MEMBERS/MEMBERS/MEMBER	FILE NOW Make Check Payal MBERS Delete	Post Fee Agent signature  FEE IS \$5  ble to Departm  10.  HITLE  HAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	0.00 ent of State  Avana (1490 C)	ADDITIONS, Communicantily Di	CHANGES  Ations Change  RIVE	*50.00
MANAGING MEMBERS/ME MANAGI	FILE NOW Make Check Payal MBERS Delete	POINT SIGNATURE  POINT	0.00 ent of State  Avana (1490 C)	ADDITIONS, Communicantily Di	CHANGES  Ations Change  RIVE	*50.00
MANAGING MEMBERS/ME  MANAGING	FILE NOW Make Check Payal MBERS Delete	POINT OF THE PROPERTY OF THE P	0.00 ent of State  Avana (1490 C)	ADDITIONS, Communicantily Di	CHANGES  A TOUS Change  RIV Change	*50.00
MANAGING MEMBERS/ME MITURE/MEMBERS/ME MITURE/MEMBERS/MEMBE	FILE NOW Make Check Payal MBERS Delate  Delate	POINT SIGNATURE  FEE IS \$5 ble to Departm  10.  INTLE RAME STREET ADDRESS CITY-ST-ZIP  TITLE RAME STREET ADDRESS CITY-ST-ZIP  TITLE RAME STREET ADDRESS CITY-ST-ZIP  TITLE RAME	0.00 ent of State  Avana (1490 C)	ADDITIONS, Communicantily Di	CHANGES  A TOUS Change  RIV Change	*50.00
MANAGING MEMBERS/ME MITURE/MEMBERS/MEM	FILE NOW Make Check Payal MBERS Delete	POIST OF A Agent Signature  / III FEE IS \$5 ble to Departm  10.  HITLE  HAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	0.00 ent of State  Avana (1490 C)	ADDITIONS, Communicantily Di	CHANGES  Change  Change	*50.00
MANAGING MEMBERS/ME MITURE/MEMBERS/ME MITURE/MEMBERS/ME MITURE/MEMBERS/MEM	FILE NOW Make Check Payal MBERS Delate  Delate	POIST OF A GORESS  JULY ST. ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST. ZIP  TITLE  NAME  TITLE  NAME  STREET ADDRESS  CITY-ST. ZIP  TITLE	0.00 ent of State  Avana (1490 C)	ADDITIONS, Communicantily Di	CHANGES  Change  Change	*50.00 Addition
MANAGING MEMBERS/ME MILL MEMBERS/MEMBE	FILE NOW Make Check Payal MBERS Delate  Delate	OPISMENT AGENT SIGNATURE  III FEE IS \$5  ble to Departm  10.  TITLE  RAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	0.00 ent of State  Avana (1490 C)	ADDITIONS, Communicantily Di	CHANGES  Change  Change	*50.00 Addition
MANAGING MEMBERS/ME MILLEM MEMBERS/ME MEMBER	FILE NOW Make Check Payal MBERS Deterte  Deterte	OPISMON Agent Signature  VIII FEE IS \$5  ble to Departm  10.  TITLE RAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	0.00 ent of State  Avana (1490 C)	ADDITIONS, Communicantily Di	CHANGES  /CHANGES  A 1,0~C Change  Prove Change  Change	*50.00 Addition
MANAGING MEMBERS/ME  MANAGING MEMBERS/MEMBERS/ME  MANAGING MEMBERS/ME  MANAGING MEMBERS/ME  MANAGING MEMBERS/ME  M	FILE NOW Make Check Payal MBERS Delete  Delete	POINT OF A GORT SIGNATURE  III FEE IS \$5 ble to Departm  10.  HITLE  HAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	0.00 ent of State  Avana (1490 C)	ADDITIONS, Communicantily Di	CHANGES  Change  Change  Change	*50.00 Addition Addition
MANAGING MEMBERS/ME  MANAGING MEMBERS/ME  MARE  MARE  MARE  MARE  MANAGING MEMBERS/ME  MITAGING MEMBERS/ME  MANAGING MEMBERS/ME  MANAGING MEMBERS/ME  MITAGING MEMBERS/MEMBERS/ME  MITAGING MEMBERS/ME	FILE NOW Make Check Payal MBERS Deterte  Deterte	OPISMON AGONT SIGNATURE  III FEE IS \$5  ble to Departm  10.  IIIIE RAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE RAME	0.00 ent of State  Avana (1490 C)	ADDITIONS, Communicantily Di	CHANGES  /CHANGES  A 1,0~C Change  Prove Change  Change	*50.00
SIGNATURE Signature, typed or printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of registered agent and title if a management of the printed name of the printed	FILE NOW Make Check Payal MBERS Delete  Delete	OPISMON AGONT SIGNATURE  III FEE IS \$5  ble to Departm  10.  ITTLE RAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE	0.00 ent of State  Avana (1490 C)	ADDITIONS, Communicantily Di	CHANGES  Change  Change  Change	*50.00  Addition  Addition

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

SIGNATURE:

3/27/00 678.222.3030
Date Daylime Phone #