2002 UNIFORM BUSINESS REPORT (UBR)

May 07, 2002 8:00 am Secretary of State DOCUMENT # L9900000178 1. Entity Name 05-07-2002 90373 007 ****50.00 FJS&C INVESTMENTS, L.C. Principal Place of Business Mailing Address 3646 SE 5TH COURT 955344 3646 SE 5TH COURT CAPE CORAL FL 33904 CAPE CORAL FL 33904 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 52-2153627 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VERDE, MARIO J Street Address (P.O. Box Number is Not Acceptable) 3646 SE 5TH COURT CAPE CORAL FL 33904 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE **MGRM** ☐ Delete TITLE ☐ Change ☐ Addition NAME VERDE, MARIO J NAME STREET ADDRESS 3646 SE 5TH COURT STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP CAPE CORAL FL 33904 **MGRM** TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME VERDE, BEVERLY NAME STREET ADDRESS 3646 SE 5TH COURT STREET ADDRESS CITY-ST-ZIP CAPE CORAL FL 33904 CITY-ST-ZIP TITLE MGRM ☐ Delete TITLE ☐ Change ☐ Addition NAME VERDE, PHILIP M NAME STREET ADDRESS 3646 SE 5TH COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33904 TITLE Delete TITI F Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

CITY-ST-ZIP

MANAGER, OR AUTHORIZED REPRESENTATIVE

CITY-ST-7IP

FILED