LIMITED LIABILITY COMPANY FILED UNIFORM BUSINESS REPORT (UBR) 02 APR 29 AM 11: 46 DOCUMENT # SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address Duval St 1333 N. DO NOT WRITE IN THIS SPACE allahassee, FL City & State hasse 4. FEI Number Applied For Not Applicable ₹*3-30*3 \$5.00 Additional 5. Certificate of Status Desired 7. Name and Address of Current Registered Agent DO NOT WRITE Filina Search IN THIS SPACE 1333 N. Divial 8. The above parmed entity submits this statem for the purpose of changing its registered office or registered agent, or both, i n the State of Florida SIGNATURE **FEE IS \$50.00** Make Check Payable to Department of State **DUE BY MAY 1** 9. MANAGING MEMBERS/MANAGERS TITLE MGR TITLE NAME Debra Grace Akatsa NAME STREET ADDRESS English River, Victoria STREET ADDRESS CITY-ST-ZIP Make, Soychelles CITY-ST-ZIP TITLE MER TITLE Natalie Rath 100005369991 NAME NAME STREET ADDRESS STREET ADDRESS Seycholles CITY-ST-ZIP CITY-ST-ZIE TITLE TITLE NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 if made under oath; that it is made under oath; that is made under oath; t

Janet M. Caruccio

SIGNATURE:

FLORIDA FILING & SEARCH SERVICES, INC.

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DATE:

04-29-02

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FCA00000015

AUTHORIZATION:

ABBIE/PAUL HODGE

TYPE OF FILING: UNIFORM BUSINESS REPORTS

NAME: 34 LIMITED LIABILITY COMPANIES

SPECIAL INSTRUCTIONS: NONE

\$1700.00

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