

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90225 001 ****50.00

DOCUMENT # L99000002722

1. Entity Name

ROMANA'S, L.L.C.

DO NOT WRITE IN THIS SPACE

966949

2. Principal Place of Business

3620 Stringfellow Road

Suite, Apt. #, etc.

3. Mailing Address

12670 New Brittany Blvd.

Suite, Apt. #, etc.

Suite 101

City & State

St. James City, FL

City & State

Fort Myers, FL

4. FEI Number

650918175

Applied For

Not Applicable

Zip

33956

Country

USA

Zip

33907

Country

USA

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Robert D. Royston, Jr.

Street Address (P.O. Box Number is Not Acceptable)

12670 New Brittany Blvd.

Suite 101

City

Fort Myers

FL

Zip Code

33907

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

Manager
Vladimir Handl
3662 Papaya Street
St. James City, FL 33956

TITLE
NAME
STREET ADDRESS
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IN THIS SPACE**

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083B (12/01)