2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000004080

1. Entity Name SUMMER BREEZE VENTURES, LLC (Previously JVL MANAGEMENT, LLC)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUN 16 PM 4:29

Principal Place of Business: 568 9th Street South, NAPLES, FL 34102

Mailing Address:

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3001 Island Point Lane	Same as 2
Suite, Apt. #, etc. #11	Suite, Apt. #, etc.
City & State Stuart FL	City & State
Zip 34996 Country USA	Zip Country

4. FEI Number 31-1695022 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Corporation Service Company 1201 Hays Street Tallahassee, FL 32301	Name No Change 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 ______________________
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

9. MANAGING MEMBERS/MANAGERS	10. ADDITIONS/CHANGES
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: John V. Lococo, MGRM 3001 Island Point Ln. #11 ~~Stuart, FL 34996~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
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CR2E083 (11/99)

13. 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] John V. Lococo, MGRM Member 4/27/00 502-589-9254 (Counse

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER | Date | Daytime Phone #

$50.00