2000	UNIFORM BUS	INESS REPO	RT (UBR)	APPROVED AND
DOCUMENT # L9900004979				FILED
KUNZIG AND SALMONSON CONSTRUCTION LLC			00 MAY -3 PM 12: 44	
				SECRETARY OF STATE
1700 N. DIXIE HIGHWAY. SUITE 101 170		Mailing Address 1700 N. DIXIE HIGHWAY. BOCA RATON FL 33432-1		TALLAHASSEE, FLORIDA
	,			
2. Principal Place of Business 1700 N. DIWE HIGHWAY 1700 N. DIW			E HIGHWAY	
Suite, Apt. #, etc. Suite, Apt.		Suite, Apt. #, etc. SUITE 12		DO NOT WRITE IN THIS SPACE
	PRATON FL	City & State BOCA RATON	1	4. FEI Number 65 – 094 3493 Applied For Not Applicable
Zip 3343		33432	Country A.	5. Certificate of Status Desired S5.00 Additional Fee Required
	6. Name and Address of Current	t Registered Agent	Nome	7. Name and Address of New Registered Agent
SALMONSON, CHRIS R				FRIS K. SALMONSON ss (P.O. Box Number is Not Acceptable) N. DIXIE HIGHWAY
1700 N. DIXIE HIGHWAY, SUITE 101 BOCA RATON FL 33432			501	
			City Boo	A RATON FL Zip 339432
8. The above	name dentity submits this statement	or the purpose of changing its	registered office or regis	stered agent, or both, in the State of Florida.
		- 11		11/20/20
SIGNATURE	Signature, typed or printed name of registered agent		P15 R SAL	Mayson 4/28/00
SIGNATUR	Signature, typed or printed name of registered agent	t and trile if applicable. (NOTE	1 - 1 - 1	MaySoN 4/28/00 Uired when reinstating) DATE
9.	MANAGING MEME	FILE NO Make Check Pay	E: Registered Agent signature requirements of the Parkers of the P	Mayson 4/28/00 Uried when reinstating) DATE DO 1 of State ADDITIONS/CHANGES
9. TITLE NAME STREET ADDRESS	MANAGING MEME MGRM FUEL AMERICA LLC 1700 N. DIXIE HIGHWAY, SUITE	FILE NO Make Check Pay BERS/MEMBERS	E: Registered Agent signature requirements DW!!! FEE IS \$50.0 yable to Department 10. TITLE NAME STREET ADDRESS	MaySoN 4/28/00 Uired when reinstating) DATE DO t of State
9. TITLE NAME	MANAGING MEME MGRM FUEL AMERICA LLC	FILE NO Make Check Pay BERS/MEMBERS	E: Registered Agent signature requirements DW!!! FEE IS \$50.0 yable to Departments 10. TITLE NAME	MaySoN 4/28/00 DATE DATE ADDITIONS/CHANGES Change Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEME MGRM FUEL AMERICA LLC 1700 N. DIXIE HIGHWAY, SUITE BOCA RATON FL 33432 MGRM KUNZIG, FRANK 1700 N. DIXIE HIGHWAY, SUITE	FILE NO Make Check Pay BERS/MEMBERS Detects Detects	E: Registered Agent signature requirements DW!!! FEE IS \$50.0 yable to Department 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mayson 4/28/00 Uried when reinstating) DATE DO 1 of State ADDITIONS/CHANGES
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9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MANAGING MEME MGRM FUEL AMERICA LLC 1700 N. DIXIE HIGHWAY, SUITE BOCA RATON FL 33432 MGRM KUNZIG, FRANK 1700 N. DIXIE HIGHWAY, SUITE	FILE NO Make Check Pay BERS/MEMBERS Deliste E 101 Deliste	E: Registered Agent signature requirements DW!!! FEE IS \$50.0 yable to Department 10. TITLE NAME STREET ADDRESS CITY- 8T-ZIP TITLE NAME STREET ADDRESS CITY- 8T-ZIP TITLE NAME STREET ADDRESS	May Son 4/28/00
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9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP	MANAGING MEME MGRM FUEL AMERICA LLC 1700 N. DIXIE HIGHWAY, SUITE BOCA RATON FL 33432 MGRM KUNZIG, FRANK 1700 N. DIXIE HIGHWAY, SUITE	FILE NO Make Check Pay BERS/MEMBERS Delate E 101 Delate Delate	E: Registered Agent signature requirements DW!!! FEE IS \$50.0 yable to Department 10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE RAME	MaySoN Ured when reinstating) DATE DO 1 of State ADDITIONS/CHANGES Change Addition -05/24/00-01042-017 *******50.00 Change Addition
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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:

4/28/00 561-391-2309
Date Daytime Phone #