

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

**FILED**  
**May 28, 2002 8:00 am**  
**Secretary of State**

05-28-2002 90726 012 \*\*\*\*50.00

DOCUMENT # **L99000007144**

1. Entity Name

**ENCORE MERCI, LLC**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**1103 FLORIDA AVE**

Suite, Apt. #, etc.

**STE. 4**

City & State

**PALM HARBOR, FL**

Zip

**34683**

Country

**US**

3. Mailing Address

**1103 FLORIDA AVE**

Suite, Apt. #, etc.

**STE. 4**

City & State

**PALM HARBOR, FL**

Zip

**34683**

Country

**US**

4. FEI Number

**65-0957360**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

**ROSE M. JENKINS**

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

**1103 FLORIDA AVE**

**STE. 4**

City

**PALM HARBOR**

FL

Zip Code

**34683**

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

**5/9/02**

**FEE IS \$50.00**

**Make Check Payable to Department of State  
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGR  
MERCADAL U.S., LLC  
1103 FLORIDA AVE., STE. 4  
PALM HARBOR, FL 34683**

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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:

**GAGLIARDI**

**05/12/02**

Date

Daytime Phone #

*Attachment*  
**Peck & Jenkins, C.P.A.'s, P.A.**

Certified Public Accountants

Phone: 727-785-2773

Fax: 727-784-4803

E-mail: rjenkins@ij.net

867539

# L99000007144

May 9, 2002

Division of Corporations

P.O. Box 1500

Tallahassee, FL 32302-1500

Re: Encore Merci, LLC  
L99000007144

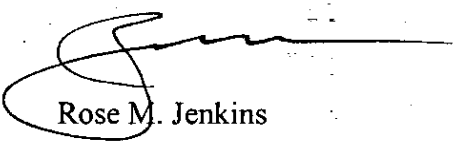
Dear Sir or Madam:

Due to a change in address, the above referenced limited liability company did not receive its Uniform Business Report form in January. We did not realize this until late April, at which time we called your office and requested a replacement form. We did not yet receive the new form via mail, so we downloaded a form from your website.

Enclosed is the completed UBR form, a check for \$50.00. As has been your practice in prior years in similar circumstances, please process this UBR without assessment of any penalty for late filing.

Thank you for your prompt attention to this matter. Please direct any questions to the undersigned, as registered agent for the corporation.

Sincerely,

  
Rose M. Jenkins

cc: Innocenzo Gagliardi, Managing Member  
Encore Merci, LLC