LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR) 200 FILED May 12, 2004 8:00 am Secretary of State

DOCUMENT # ム	19000007594
1. Entity Name	
LOGANDARRY	Partners, LL.C



1. Entity Nam	NBARRY PARTM	ers, LL.C.		05-12-2004 90006 027 ****55.00		
	DO NOT WRITE		ACE	24 07	74474	
2. Principal Place of Business 208/CAVAIIA P.J. Suite, Apt. #, etc. 3. Mailing Address 208/CAVAIIA P.J. Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State Zip 2 2	Country 1	Zip	Ach FL. Country Sadias Rivo	4. FEI Number 59 - 3607213 5. Certificate of Status Desired 7. Name and Address of Current Regi	Applied For Not Applicable \$5.00 Additional Fee Required stered Agent	
DO NOT WRITE IN THIS SPACE Name						
the obligati	ions of registered agent. Signature, typed or printed name of registered agent a	FE Make Check Payable	E IS \$50.00 to Florida Departmi E BY MAY 1	1 21 21	DATE	
0	AAANACING AAFAAREI					
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER MCRM GERARD 2081 CAVALLA MORE MANAGING MEMBER MCRM ANAGING MEMBER MANAGING MEMBER MANAGING MEMBER MANAGING MEMBER MANAGING MEMBER MANAGING MEMBER MANAGING MEMBER MCRM MCRM	NEX Rogel EL.32963	TIFLE NAME STREET ADDRESS CITY-ST-ZIP		(CALCE) GOOD	
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11. Lhereby d	certify that the information supplied with	this filing does not qualify for th	ne exemption stated in S	ection 119.07(3)(i) Florida Statutes, I furth	ner 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