2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 MAY -4 AM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L99000008006

1. Entity Name
MARCO DEVELOPMENT, LLC

Principal Place of Business	Mailing Address
247 N. COLLIER BLVD., SUITE 202 MARCO ISLAND FL 34145	247 N. COLLIER BLVD., SUITE 202 MARCO ISLAND FL 34145-3015

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1061 S. BARFIELD DR.	1061 S. BARFIELD DR.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MARCO ISLAND, FL	City & State: MARCO ISLAND, FL
Zip: 34145 Country: USA	Zip: 34145 Country: USA

4. FEI Number 52-2205193 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MORRIS, WILLIAM G ESQ.
247 N. COLLIER BLVD., SUITE 202
MARCO ISLAND FL 34145

7. Name and Address of New Registered Agent

Name: IVASHKOV, VLADIMIR
Street Address (P.O. Box Number is Not Acceptable): 1061 S. BARFIELD DR.
City: MARCO ISLAND FL Zip Code: 34145

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 _____ IVASHKOV, VLADIMIR 04/07/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

MARCO DEVELOPMENT LLC

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS			10. ADDITIONS / CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR ROJKOV, PAVEL 1225 RIVER ROAD APT. 2B EDGEWATER NJ 07020	☐ Delete	MGRM IVASHKOV, VLADIMIR 1061 S. BARFIELD DR. MARCO ISLAND, FL 34145	☐ Change ☒ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete	100003267571--1 -05/26/00--01004--031 *****50.00 *****50.00	☐ Change ☐ Addition
		☐ Delete	100003267571--1 -05/26/00--01004--032 ******5.00 ******5.00	☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition

CR2E083 (9/99)

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 REQUIRED IVASHKOV, VLADIMIR 04/07/00 941/3890680
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER — Date — Daytime Phone #