

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

FILED
Aug 24, 2004 8:00 am
Secretary of State

08-24-2004 90046 007 ****50.00

DOCUMENT # M000000000183

1. Entity Name

Horizon Orlando Two, LLC



DO NOT WRITE IN THIS SPACE

24081294

2. Principal Place of Business

3. Mailing Address

240 N. Washington Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

7th Floor

City & State

City & State

Sarasota, FL

Zip

Country

Zip

Country

34236

4. FFI Number

59-35943D8

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Daniel Branch

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

240 N. Washington Blvd.

7th Floor

City

FL

34236

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

CED

7/22/04

DATE

FEE IS \$50.00

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGR
Kern, Martin J.
240 N Washington Blvd.
Sarasota, FL 34236

TITLE
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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

Signature and typed or printed name of signing managing member, manager, or authorized representative

7/22/04 (941) 925-3490

Date

Daytime Phone #

CR2E03B (12/02)