1. Entity Name)UUU1813	•	A Property				
RICHAP	RD B. HERMAN, L.L.C.			E	ILEB			
Principal Place	e of Business	Mailing Address		טן אטר	20 AM 8: L	4/		
9176 LONG L BOCA RATON	AKE PALM DR. I FL 33496	9176 LONG LAKE PALM BOCA RATON FL 33496	DR.	O JUL SECRET - THEORAST/	ARY OF STATI	E	الم المعتبر ال	_ we
			F	TALLAH	ANTERIOR DE LA COMPANION			
2. Principal PI 3109 6	lace of Business CONUL HVENUE, State	3. Mailing Address 3/09 Gra	and Avenue	.		}		
Suite Apty	#, etc	0.3-1.4-1-	08		DO NOT \	WRITĘ IN THIS S	SPACE	
City	MI, FloridA	City Signing,	92	4. FEI N	umber 11-352	26616	<u> </u>	plied For t Applicabl
73/33	3 Country A	zig3/33	Country A	5. Certif	icate of Status Desire		\$5.00 Add Fee Require	
<u> </u>	6. Name and Address of Curre	nt Registered Agent	Name	7. Name	and Address of Ne	w Registered A	Agent	
HE	RMAN, RICHARD B			nee /P O Boy N	lumber is Not Accep	table)	·	
310	09 GRAND AVENUE, STE 308	•	Street Addre	333 (1.0. 80%)	number is Not Accep		<u></u>	
MIA	AMI FL 33133		City				Zip Cod	
			City			FL	. _,, 555	
						(5)		_
8. The above	named pritity submits this patement	t for the purpose of changing it	s registered office or reg	istered agent, o	or both, in the State of	of Florida.	/	
4	named pritity submits this gravement	RICHARD B.	s registered office or reg HESMAN TE: Registered Agent signature re			of Florida.	/	- · · · · · · · · · · · · · · · · · · ·
4	AND ME	RICHARD B. (NO FILE N Make Check P	HESMAN TE: Registered Agent signature re IOW!!! FEE IS \$50. ayable to Department	quired when reinstation OO nt of State	10000 -07.	118/01 DATE	/ 771 1065 ******	006 _
8. The above SIGNATURE _	Suffature, typed or printed hame of registered ag	PICHARO B (NO FILE N Make Check P Due B	HESMAN TE: Registered Agent signature re IOW!!! FEE IS \$50.	quired when reinstation OO nt of State	10000 -U7,	1/8/0/ DATE 14509 /31/010)1065 *****	006 _
SIGNATURE .	Suffature, typed or printed hame of registered ag	PICHARO B (NO FILE N Make Check P Due B	TE: Registered Agent signature re NOW!!! FEE IS \$50. ayable to Department by September 26, 200 10. TITLE	quired when reinstation OO nt of State	10000 -U7,	0 /18 /0/ 1001 14509 131/01-0 14509 1509)1065 *****	006 55.00
SIGNATURE _ 9. TITLE NAME	Spriature, typed or printed hame of registered age MANAGING MEM MANAGING MEM RICHARD RICHARD AUGUST AUGU	FILE N Make Check P Due B MBERS/MANAGERS Delete Solt 308	TE: Registered Agent signature re NOW!!! FEE IS \$50. ayable to Departmet by September 26, 200 10. TITLE NAME STREET ADDRESS	quired when reinstation OO nt of State	10000 -U7,	0 /18 /0/ 1001 14509 131/01-0 14509 1509)1065 *****	006 55.00
9. IIITLE NAME STREET ADDRESS CITY-ST-ZIP	Surfature, typed or printed hame of registered ag	RICHARD B. Interpretation of the properties of	TE: Registered Agent eignature re IOW!!! FEE IS \$50. ayable to Departmen by September 26, 200 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	quired when reinstation OO nt of State	10000 -U7,	0 /18 /0/ 1001 14509 131/01-0 14509 1509	01065 ****** □ Change	006 55.00
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9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Spriature, typed or printed hame of registered age MANAGING MEM MANAGING MEM RICHARD RICHARD AUGUST AUGU	RICHARD B. Interpretation of the properties of	TE: Registered Agent eignature re IOW!!! FEE IS \$50. ayable to Departmen by September 26, 200 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	quired when reinstation OO nt of State	10000 -U7,	0 /18 /0/ 1001 14509 131/01-0 14509 1509	01065 ****** □ Change	006 55.00
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