2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # MOOO0001933 DURST DICE AMERICA, LLC			FILED	i	
			01 APR 23 PM 4: 10		
Principal Place of Business	Mailing Address		SECRETARY OF STATE TALLAHASSEE, FLORIDA		
16 STERLING LAKE RD. TUXEDO NY 14987-3526	16 STERLING LAKE RD. TUXEDO NY 14987-3526		TALLAHASSEE, FLORIDA		
	•				
2. Principal Place of Business 3. Mailing Address 50 METHOUL		STHILLD	2		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	100	DO NOT WRITE IN THIS SPACE		
City & State	Rity & State	114	4. FEI Number 52-2135690 Applied Not App		
Zip Country	14623 /	Country YOURDE	5. Certificate of Status Desired \$5.00 Additional Fee Required	al	
6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD		Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33324					
		City	FL Zip Code		
8. The above named entity submits this statement f	or the purpose of changing its re	egistered office or regi	istered agent, or both, in the State of Florida.		
SIGNATURE Signature, typed or printed name or registered age	t and title if applicable. (NOTE: I	PORATI Registered Agent signature red	Quired when reinstating) DATE		
		W!!! FEE IS \$50.0			
	Make Check Pay	able to Departmen	nt of State		
MANAGING MEME		10.	ADDITIONS/CHANGES	Addition	
TILE PRESIDENT NAME ARTHUR SHUFELT	Delete	TITLE NAME	. Orange .	TAGORIOI (
STREET ADURESS 38 TAYLOR ROALS	שווע ויי	STREET ADDRESS CITY-ST-ZIP			
TITLE TO THE STATE OF THE STATE	Delete	TITLE	☐ Change ☐	Addition	
NAME JEFFSHUFELT STREET ADDRESS 6789 GOLFVEW	CISE	NAME STREET ADDRESS	900004135399		
TITLE VICTOR - NY -/	Delete	TITLE	#####50_00 ####50 Change		
NAME JEHOUNESHUFET		NAME			
STREET ADDRESS CITY-ST-ZIP	YIR	STREET ADDRESS CITY-ST-ZIP			
TITLE MEMBER.	☐ Delete	TITLE	☐ Change] Addition	
NAME STREET ADDRESS ACCE AMERICA	LLC	NAME STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP		1 4450	
TITLE HEYBER	☐ Delete	TITLE NAME	☐ Change ☐	Addition	
STREET ADDRESS DURST WCL.	1 . 11 4	STREET ADDRESS			
	<u> </u>	CITY-ST-ZIP	☐ Change ☐	Addition	
TITLE '	LJ Delete	NAME	_ 5	-	
STREET ADDRESS CITY-ST-ZIP .		STREET ADDRESS CITY-ST-ZIP			
11 L boroby cartify that the information Challed wi	th this filing does not qualify for t	the exemption stated i	in Section 119.07(3)(i), Florida Statutes. I further certify that the inform s if made under oath; that I am a managing member or manager of	nation the	
indicated on this report is true and accurate an	d that my signature shall have tr	ie same legal ellect at sport se required by C	s ir made ander odus, triat i am a managing member or manager or c hanter 608. Florida Statutes		