**FILED** 

May 08, 2003 8:00 am Secretary of State

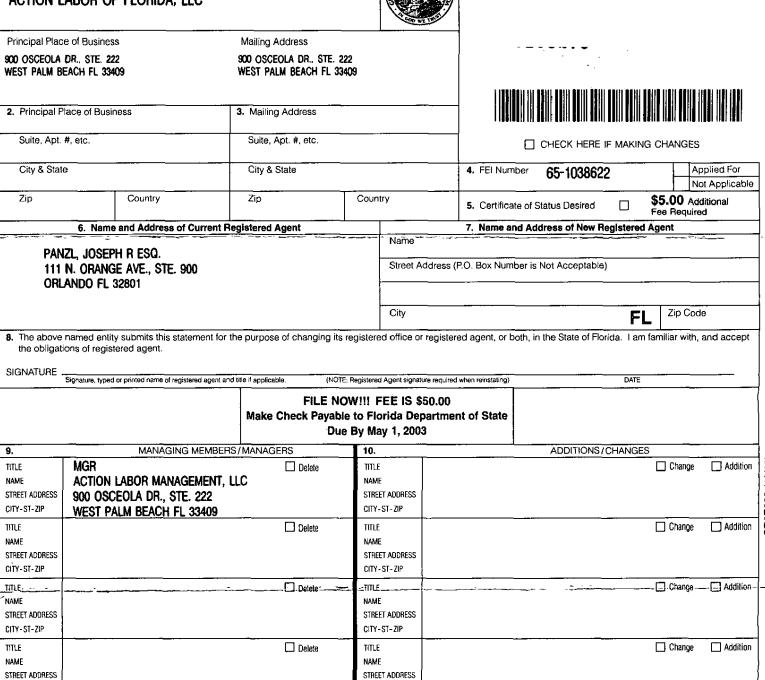
05-08-2003 90078 022 \*\*\*\*50.00

## 2003 LIMITED LIABILITY COMPANY

## **UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # M0000002021

1. Entity Name

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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 mysignature 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.

CITY-ST-7IP

STREET ADDRESS CITY-ST-ZIP

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TITLE

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NAME

CITY-ST-ZIP TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP TITLE

NAME

REQUIRED KAREN HOOVER,

☐ Delete

☐ Delete

Change

☐ Change

Addition

☐ Addition