2001	UNIFORM BUSINI	ESS REPOF	RT (UBI	R)			
DOCUMENT # M0000002318					4 . a.s.		
1. Entity Nam	OTA-STUFF, L.L.C.	•		SECRETARY DIVISION OF CO	OF STATE RPORATIONS		
Principal Plac	a of Rusinoss M	ailing Address		<u>_</u>	01 SEP 26 1	PM 3: 58	
1	BARBARA OR 7	7502 SANTA BARBARA DR FT PIERCE FL 34951				U 00	
2. Principal P	lace of Business 3.	Mailing Address					
4966 Spc Suite, Apt.	nkling fine Cicle 4	828 N. Kings Suite, Apt. #, etc. OMB # 424	Hwy		DO NOT WRITE	E IN THIS SPACE	(IIII) III) TOBI
City & State	e	City & State	2 21.0	4. FEIN	ひと しょうかい	NO ————————————————————————————————————	oplied For
3495	Country	Zip	Country		icate of Status Desired	□ \$5.00 Add	
3445	6. Name and Address of Current Regis		St Luci	<u> </u>	and Address of New Re	Fee Require	d
CHIAIN POENDA				percis Chibio			
			Street Address (P.O. Box Number is Not Acceptable)				and a
	TENDE TE 04001		490	<u>ele Spa</u>	inkling, Pi	res Cali	•
8. The above	named entity submits this statement for the p	ourpose of changing its re	יטר	r registered agent,	or both, in the State of Flori	34	551
	7						ľ
SIGNATURE _	Drends the	nn			9-	21-01	
SIGNATURE	Signature, typed or printed name of registered agent and title		W!!! FEE IS		2000041	616692	 
		FILE NOV Make Check Paya Due By S	W!!! FEE IS sable to Depart September 26,	550.00 ment of State	2000041 -09/28, *****	616692 /01010601 50.00 *****	019 (
SIGNATURE _ 9. TITLE	Signature, typed or printed name of registered agent and title  MANAGING MEMBERS/M  MGR	FILE NOV Make Check Paya Due By S	W!!! FEE IS \$	550.00 ment of State 2001	2000041 -09/28, ******	616692 /01010601 50.00 *****	019 50.00
9. TITLE NAME STREET ADDRESS	MANAGING MEMBERS/N MGR CHINN, BRENDA 7502 SANTA BARBARA DR	FILE NOV Make Check Pays Due By S	W!!! FEE IS \$ able to Depart september 26,  10.  TITLE NAME STREET ADDRESS	550.00 ment of State 2001	2000041 -09/28, ****** ADDITIONS/C	DATE  616692  701-01060-1  50.00 ******  CHANGES  Change	019 50.00
9. TITLE NAME	MANAGING MEMBERS/N MGR CHINN, BRENDA 7502 SANTA BARBARA DR FT PIERCE FL 34951	FILE NOV Make Check Pays Due By S	W!!! FEE IS \$ able to Depart september 26, 10. TITLE NAME	550.00 ment of State 2001	2000041 -09/28, ******	B 1 6 5 9 2 / 01 - 01 0 6 0	019 50.00 □ Addition &
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/M MGR CHINN, BRENDA 7502 SANTA BARBARA DR FT PIERCE FL 34951 MGR CRIPPEN, DAVID 2950 OLEPIKE DR	FILE NOV Make Check Pays Due By S  IANAGERS  Delete	W!!! FEE IS \$ able to Depart september 26,  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Brench	2000041 -09/28, ****** ADDITIONS/C	DATE  616692  70101060  50.00 ******  CHANGES  PChange  Rue circ  3495	013 50.00 Addition (20)8 \$20
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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: BUSING NOTURE PEQUIBRENCY CHINA SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

727-365-7328 561-468-4688

9-21-01

STAPLE CHECK HERE