2001 UNIFORM BUSINE	:22 KFLOK	ı (ARI	K)
DOCUMENT # M0000002504 1. Entity Name			
P&R HOLDINGS, LLC			FILED
Principal Place of Business Mailing Address			OIFEB 15 AM 11: 05
2445 Jenner Ct. SAME			SECRETARY OF STATE
Principal Place of Business 2445 Jenner Ct. Same Colorado Springs, Colorado 80919			TALLAHASSEE. FLORIDA
	Mailing Address		
			DO NOT WRITE IN THIS SPACE
ColorADO Springs, ColorAND	O Springs, Colorano City & State		4. FEI Number Applied For Not Applicable
	ip C	ountry	S. Certificate of Status Desired Status Desired Status Desired Status Desired Status Desired Status Desired
6. Name and Address of Current Regist	ered Agent		7. Name and Address of New Registered Agent
Jacqueline NorDell		Name_	
Pine to Palm Realty 3301 TAYLOR RD. Punta Gorda, FL 33950			ddress (P.O. Box Number is Not Acceptable)
3301 TAYLOR RD.			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Punta Gorda, FL 33950		City	FL Zip Code
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.			
SIGNATURE Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Regi	stered Agent signatu	0000370:35206
		والتناسية والتعاود	*****55.00 *****55.00
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State			
9. MANAGING MEMBERS/M	EMBERS	10.	ADDITIONS/CHANGES
TITLÉ	☐ Delete	TITLE	MANAGING Member Change Addition &
NAME	. [NAME (DAN P. RODA
STREET ADDRESS		STREET ADDRESS	2448 Jeniser Ct
City-St-ZiP		CITY-ST-ZIP	MANAGING Member Change Addition DAN P. RODA 2445 Jewser Ct Color ADO Sorings Color ADO 80919 Member Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition Change Cha
TITLE NAME		TITLE NAME	Member Change Addition
STREET ADDRESS	i	STREET ADDRESS	A. Peter Peters #1 Blue Fox Ct
CITY-ST-ZIP		CITY-ST-ZIP	Denver Colorado 80127
TITLE		TITLE	Menber, Change Addition
NAME STREET ADDRESS		NAME STREET ADDRESS	JOAN D. Roda ZYUS JENNER et.
CITY-ST-ZIP		CITY-ST-ZIP	CALDRADO SORMAS, COBRADO 80919
TITLE	□ Delete	TITLE	Mo, m he z
NAME	1	NAME	Cynthin Petens #1 Blue Fox Ct.
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	Denver Colorado 80127
TITLE	☐ Delete	TITLE	Change Addition
NAME		NAME	/
STREET ADDRESS 4. CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	1-/
TITLE		TITLE	Change Addition
NAME	- · · ·	NAME	•gu,uni
STREET ADDRESS CITY-ST-ZIP	J.	STREET ADDRESS CITY-ST-ZIP	· ·
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: Dan G. Rodu Managing Member 2/12/01 719-260-9387			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, VANAGER, OR AUTIORIZED REPRESENTATIVE Date Dayline Phone #			