2003 LIMITED LIABILITY COMPANY

UNIFORM BUSINESS REPORT (UBR)

3/1

FILED Apr 21, 2003 8:00 am Secretary of State

DOCUMENT # M00000002504 P & R HOLDINGS, LLC					03-14-2003 90002 017 ****55.00				
Principal Plac	e of Business	Mailing Address			JJUHTURU				
2445 JENNER (COLORADO SP	COURT PRINGS CO 80919	2445 JENNER COURT COLORADO SPRINGS CO	80919						
Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
Zip Country		Zip	Country		5. Certifical	5. Certificate of Status Desired \$5.00 Additional Fee Required			Iditional
	6. Name and Address of Curren	t Registered Agent	1	•	7. Name an	d Address of New Re	gistered Ag	ent	
-	ي مان الله الله الله الله الله الله الله ال	<u> Agus and an </u>		Name				•	
	RDELL, JACQUELINE 1 TAYLOR ROAD		•	Street Address (P.O. Box Number is Not Acceptable)					
PUN	ITA GORDA-FL 33950		. -			· ·			
	3.		·	City		 -	FL	Zip Cod	ie
the obligati	named entity submits this statement flons of registered agent.					oth, in the State of Flori	da. I am far	niliar with,	and accept
	Signature, typed or printed name of registered agen	· F		gent signature required	when reinstating)		WAIE		
		Make Check Payat		-	nt of State				·
9.	MANAGING MEMB		10.			ADDITIONS/C			
TITLE	MGR	Detete	TITLE	Mon	aging 1	Member P.	D	Change	Addition
NAME STREET ADDRESS	RODA, DANIEL P		NAME STREET	ODORESS 244	s Koda	Daviel P.			
CITY-ST-ZIP	2445 JENNER COURT COLORADO SPRINGS CO 809	40	CITY-ST	-ZIP	DAGA C	prings CD 8	919		
TITLE	MGRM	Delete	TITLE	Man	اهدامه	amper.		Change	Addition
NAME	PETRUS, ARVYD P	42 2000	NAME	Poto	115 Aev	IYD K	_		
STREET ADORESS	1 BLUE FOX COURT		STREET A	ADDRESS 4 Q1	Le Fox	⅓			
CITY-ST-ZIP	LITTLETON CO 80127		CITY-ST	-ZIP L. TT	leton (20 80127			
TITLE	MEM '	Dalete	TITLE	Man	aging 1	Nember.	У	Change	Addition
_NAME	RODA: JOAN D		- NAME -	Roo	A FOR	Ward :			
STREET ADDRESS	2445 JENNER CT		STREET A	ADDRESS 2	Jen.	ver ct			

CITY-ST-ZIP CITY-ST-ZIP COLORADO SPRINGS CO 80919 Change Delete TITLE Addition TITLE MEM NAME PETERUS, CYNTHIA NAME STREET ADDRESS STREET ADDRESS #1 BLUE FOX CT. CITY-ST-ZIP CITY-ST-ZIP DENVER CO 80127 TITLE ☐ Change ☐ Addition ☐ Delete TITLE NUME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Detete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 explored to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MANUEL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANGGER, OF AUTHORIZED REPRESENTATIVE

719-Z**6**0