

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90025 004 ****50.00

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # M01000000697

1. Entity Name
STEPNEY, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 130 Center Road		3. Mailing Address 4666 Main Street	
Suite, Apt. #, etc. n/a		Suite, Apt. #, etc. n/a	
City & State Easton, CT		City & State Bridgeport, CT	
Zip 06612	Country Fairfield	Zip 06606	Country Fairfield

DO NOT WRITE IN THIS SPACE

4. FEI Number 06-1471478	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name CT Corporation System	
Street Address (P.O. Box Number is Not Acceptable) 1200 So. Pine Island Road	
City Plantation	FL Zip Code 33324

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 George W. Ganim
Signature of registered agent or printed name of registered agent and title if applicable.

DATE
4/8/02

FEE IS \$50.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM George W. Ganim 4666 Main Street Bridgeport, CT 06606	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: George W. Ganim
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/8/02

Date

203-372-7772

Daytime Phone #

CR2E083B (12/01)

The Ganim Law Firm, P. C.
GANIM, GANIM & GANIM

4666 MAIN STREET
BRIDGEPORT, CONNECTICUT 06606

TELEPHONE (203) 372-7772

FAX (203) 374-7199

GEORGE W. GANIM*
GEORGE W. GANIM, JR.
RAYMOND W. GANIM†

*ALSO ADMITTED IN MA
†ALSO ADMITTED IN D.C.

PAUL J. GANIM
THOMAS G. GANIM
JOSEPH P. GANIM
OF COUNSEL

Attachment
938897

#40100000687

April 8, 2002

Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314

Re: Uniform Business Report
Stepney, LLC

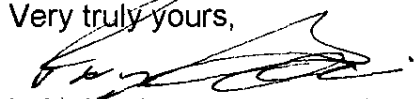
Gentlemen:

Enclosed is a completed Limited Liability Company Uniform Business Report together with a check, in the amount of \$50.00, in payment of the filing fee.

Please update your records to reflect that the mailing address for the company is: **4666 Main Street, Bridgeport, CT 06606**

Thank you for your assistance in this matter.

Very truly yours,



Raymond W. Ganim

RWG/bf
Enc.