

# LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M02000003490

1. Entity Name

ALLOY MARKETING AND PROMOTIONS, LLC



FILED

03 MAY 20 AM 8:51

CLERK OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

500 S. Chaffee Road

3. Mailing Address

C/O Alloy Inc. 151 W. 26th St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Lot 23

11th Fl

City & State

City & State

Jacksonville, FL

New York, NY

Zip

Country

Zip

Country

32221

US

10001

US

4. FEI Number

27-0037636

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

City

Tallahassee

FL

Zip Code

32301

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

LINDA J. SNOOK

3/14/03

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State

DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

President / Manager  
Matthew C. Diamond  
151 W. 26th St. 11th Fl  
New York, NY 10001

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

900016084639  
05/23/03--01051--018 \*\*45.00

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Secretary  
Gina DiGioia  
151 W. 26th St. 11th Fl  
New York, NY 10001

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

900016084639  
04/16/03--01003--011 \*\*5.00

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Treasurer  
Michael Herman  
151 W. 26th St. 11th Fl  
New York, NY 10001

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Assistant Secretary / Manager  
Samuel A. Gradess  
151 W. 26th St. 11th Fl  
New York, NY 10001

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Manager  
James K. Johnson, Jr.  
151 W. 26th St. 11th Fl  
New York, NY 10001

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Gina DiGioia

3/13/03

Date

212-244-4307

Daytime Phone #

CR2E083B (12/02)