

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

FILED
Feb 28, 2002 8:00 am
Secretary of State

02-28-2002 90041 030 ****50.00

DOCUMENT # M98000000022

1. Entity Name

ACCESS AMERICA FINANCIAL, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4040 SHERIDAN ST.

Suite, Apt. #, etc.

3. Mailing Address

4040 SHERIDAN ST.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

HOLLYWOOD, FL

City & State

HOLLYWOOD, FL

4. FEI Number

65-0741093

Applied For

Not Applicable

Zip

33021

Country

USA

Zip

33021

Country

USA

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

LAWRENCE B. AUSTIN

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

4040 SHERIDAN ST.

City

HOLLYWOOD

FL

Zip Code

33021

**DO NOT WRITE
IN THIS SPACE**

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.

DATE

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**

PRESIDENT - MGR
LAWRENCE AUSTIN
7 FOX FIRE ROAD
HOLLYWOOD, FL 33021

**TITLE
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CITY-ST-ZIP**

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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:

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

Date

Daytime Phone #

02/19/02 954-961-5580.

CR2E083B (12/01)