

2nd and
FINAL NOTICE: File on or before Sept. 29, 1999 or Limited Liability Company
will be dissolved.

FILED

99 JUL 29 AM 9:54

SECRETARY OF STATE
TALLAHASSEE, FL 32304

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILING FEE Annual Report \$100.00 + \$68.75 Corporation Supplemental Fee + \$400.00 Late Fee
\$568.75
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address
of Limited Liability Company **DOCUMENT #** M98000000614

MICROSOFT HOMEADVISOR, LLC
ONE MICROSOFT WAY
REDMOND WA 98052-6399

1a. Principal Place of Business Address
ONE MICROSOFT WAY
REDMOND WA 98052

2. Principal Place of Business
One Microsoft Way
Suite, Apt. #, etc.

2a. Mailing Address c/o Robert
Eshelman, One Microsoft Way
Suite, Apt. #, etc.

3. Date Organized or Qualified
06/11/1998

3a. State of Formation
NV

City & State
Redmond, WA

City & State
Redmond, WA

4. FEI Number
91-1898827

☐ Applied For
☐ Not Applicable

Zip
98052-6399

Country
USA

Zip
98052-6399

Country
USA

5. Date of Last Report

6. Certificate of Status Desired
☐ Additional Fee Required

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent/Office

CORPORATION SERVICE, COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City
Zip Code
FL

9. Pursuant to the provisions of Sections 608.416 and 608.608, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when resigning)

DATE

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	XXXXXX XXXXXX	ONE MICROSOFT WAY	REDMOND WA 98052-6399
MGR	XXXXXX XXXXXX	ONE MICROSOFT WAY	REDMOND WA 98052-6399
MGR	Bryan P. Mistele	One Microsoft Way	Redmond, WA 98052-6399
MGR	David P. Danford	One Microsoft Way	Redmond, WA 98052-6399

LC
7-30-99

100002944811-4

11. I do 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 annual 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: David P. Danford David Danford, Manager 07/20/99 (425) 882-8080

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #



ACCOUNT NO. : 072100000032

REFERENCE : 322407 4726922

AUTHORIZATION :

COST LIMIT :

Patricia Papp
~~588.75~~ 588.75

ORDER DATE : July 28, 1999

ORDER TIME : 10:03 AM

ORDER NO. : 322407-005

CUSTOMER NO: 4726922

CUSTOMER: Ms. Tamara Steinke
Microsoft Corp Law & Corp
1 Microsoft Way Bldg 8
Po Box 97017
Redmond, WA 980520000

ANNUAL REPORT FILING

NAME: MICROSOFT HOMEADVISOR, LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: JEANINE REYNOLDS

EXAMINER'S INITIALS:

RECEIVED
99 JUL 29 AM 11:28



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 29, 1999

CSC

SUBJECT: MICROSOFT HOMEADVISOR, LLC
Ref. Number: M98000000614

We have received your document for MICROSOFT HOMEADVISOR, LLC and the authorization to debit your account in the amount of \$188.75. However, the document has not been filed and is being returned for the following:

The fee to file your annual report is \$588.75. Please return the annual report along with a newly issued check in the correct amount.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6043.

Shawn Logan
Document Specialist

Letter Number: 799A00038733

RESUBMIT
Please give original
submission date as file date.

RECEIVED
99 JUL 29 PM 4:00