2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 08, 2001 8:00 am
Secretary of State
08-08-2001 90012 013 ***150.00

DOCUMENT # P00000043461

1. Entity Name
CHILLY'S MOTHER NATURE, CORP.

Principal Place of Business
3939 NW 7 ST. # 206
MIAMI, FLORIDA 33136-2625

Mailing Address

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1030299 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

VIVIANA SILVA
3939 NW 7 ST. # 206
MIAMI, FLORIDA 33136

7. Name and Address of New Registered Agent

Name

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

City — FL — Zip Code

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 _______________ 08-02-2001

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/VP/S/T/D VIVIANA SILVA 3939 NW 7 ST # 206 ~~MIAMI, FLORIDA 33136~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E083 (11/00)

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: _______________ 08-02-2001 305-631-0632

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

Attachment # P00000043461

C00075138

Miami August 2, 2001

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 1500
TALLAHASSE, FL. 32302-1500

Dear Sir or Madam:

Let it be know that our filing Uniforms Business Report of 2001 is been file late, unfortunately the first notice was never delivery to us by the post office, the truth is that I never received it and I did not know that this was supposed to be done. One of the many reasons can be that I have a new address.

I kindly ask you to please understand that I'm willing to do everything right and on time, but this time it was not my fault. I ask you to please accept the payment of $150.00 to renew and update our Business Report for 2001.

I appreciated very much your help and understanding.

Sincerely Yours,

Viviana Silva
President
Chilly's Mother Nature, Corp.