

M12000000494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

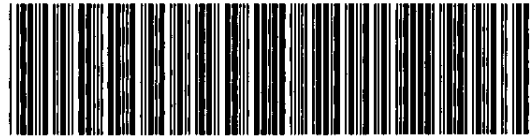
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PMAT PRADO, L.L.C.
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alan J. Marcus, Esq.
Name of Person
Alan J. Marcus, Esq.
Firm/Company
20803 Biscayne Blvd. Suite 301
Address
Aventura, FL 33180
City/State and Zip Code
alan@alanjmarcus.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alan J. Marcus at (305) 937-1800
Name of Person Area Code and Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee \$30 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy \$60 Filing Fee, Certificate of Status & Certified Copy

**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: PMAT PRADO, L.L.C.

2. This entity was formed under the laws of: DELAWARE

3. This entity was authorized to transact business in Florida on 01/25/2012
and its Florida document/registration number is M12000000494

4. The name and address of each manager or managing member is as follows:

Title:

“MGR” = Manager

“MGRM” = Managing Member

Name and Address:

MGR

ISRAM REALTY MANAGEMENT, LLC
506 S. DIXIE HIGHWAY
HALLANDALE, FL 33009

Required Signature: _____

Signature of Manager, Managing Member or Member

Filing Fee: \$25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
12 APR -4 PM '16

FILED