#### I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MILLIE RAPHAEL

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	RAPHAEL, MILLIE A	Name	RAPHAEL, ZOE O
Address	1581 BRICKELL AVE #106	Address	1581 BRICKELL AVE #106
City-State-Zip:	MIAMI FL 33129	City-State-Zip:	MIAMI FL 33129

# 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000016935

Entity Name: MAGICAL THINKING ENTERTAINMENT LLC

### **Current Principal Place of Business:**

**1581 BRICKELL AVENUE** #106 MIAMI, FL 33129

#### **Current Mailing Address:**

**1581 BRICKELL AVENUE** #106 MIAMI, FL 33129

#### **FEI Number: NOT APPLICABLE**

## Name and Address of Current Registered Agent:

RAPHAEL, MILLIE A 1581 BRICKELL AVE #106 MIAMI, FL 33129 US

SIGNATURE:

Electronic Signature of Registered Agent

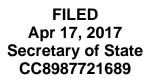
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

MGR

Date

Certificate of Status Desired: No

04/17/2017



Date