FILED **2002 UNIFORM BUSINESS REPORT (UBR)** Sep 23, 2002 8:00 am Secretary of State DOCUMENT # L0000001806. 05-07-2002 90394 037 ****50.00 MAGNIFICENT SEVEN LLC Principal Place of Business Mailing Address 150 ALHAMBRA CIR., STE. 1240 150 ALHAMBRA CIR., STE, 1240 CORAL GABLES FL 33134 CORAL GABLES FL 33134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65=1123030 Not Applicable Zip Country -Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6.—Name and Address of Current Registered Agent ----7:-Name and Address of New Registered Agent FERNANDEZ, JORGE A Street Address (P.O. Box Number is Not Acceptable) 150 ALHAMBRA CIR., STE. 1240 CORAL GABLES FL 33134 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By September 25, 2002 MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGR TITLE ☐ Change ☐ Addition Delete NAME FERNANDES, JORGE A NAME STREET ADDRESS 150 ALHAMBRA CIR., STE. 1240 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CORAL GABLES FL 33134 TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete Addition Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-\$T-ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 truetee expowered to report as required by Chapter 608, Florida Statutes.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

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

Delete

9/18/02

(305)446-1331

☐ Change

Addition

Dayt

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JORGE A. FERNANDEZ
ATTORNEY AT LAW

42920

JORGE A. FERNANDEZ, P.A.

LAW OFFICES

L00000001806

150 ALHAMBRA CIRCLE
SUITE 1240
CORAL GABLES, FLORIDA 33134
PHONE: (305) 446-1331
FAX: (305) 448-3056
E-MAIL: JAFPAMIA@AOL.COM

September 18, 2002

Division of Corporation Registration Section P.O. Box 6478 Tallahassee, Florida 32314

RE: MAGNIFICENT SEVEN, LLC FEI NO. 65-1123030

Attention: Customer Service

Attached please find the 2002 Uniform Business Report. The fee of \$50.00 has been paid with check no. 3 on April 24, 2002. The company has been assigned with the above-referenced FEI number.

Any questions, please contact my office. Thank you in advance for your help in this matter.

Jorge A. Fernandez

Very truly vours,

Manager

Magnificent Seven LLC

JAF/lc

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