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03/22/02

(305)8714161

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

NELSON GONZALES

MATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGENG MEMBER, BARAGER, OR AUTHORIZED REM

FILED Jun 10, 2002 8:00 am Secretary of State

05-13-2002 90060 050 ****55.00

L000000003991 **DOCUMENT #** 1. Entity Name GONYOR, L.L.C. DO NOT WRITE IN THIS SPACE 92049 Principal Place of Business 10268 NW 56TH Street 10268 NW 56TH Street Suite, Apt. #, etc. Suite, Apr. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Miami Florida Miami Florida 65-0997848 Not Applicable Country Country ^{Zip}33178 ^{Zip}33178 \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE NELSON GONZALES Street Address (P.O. Box Number is Not Acceptable) 10268 NW 56 Street IN THIS SPACE Zip Code Miami 33178 ent for the purpose of changing its registered office of registered agent, or both, in the State of Florida. SIGNATURE Make Check Payable to Departm LESS DUE BY MAY I 9. MANAGING MEMBERS/MANAGERS EXCURS TO XX DDE mu . NELSON GONZALES NAME STREET ADORESS 10268 NW 56 Street STREET ALLOWES CITY-ST-ZIP CITY: ST-ZIP Miami F1, 33178 TITLE mu 📜 NAME STREET ADDRESS STREET ADDRES C/TY - 51 - 2/P CITY ST. 7P MILE OTTLE S NAME STREET ADDRESS STREET AVORESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NALE STREET ADDRESS STREET ADDR CITY-ST-7P CITY, ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-51-21P 11. I 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 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.