1 of 2

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 APR 28 AM 10:06

DOCUMENT # L00000011924

1. Entity Name

MIAMI UNO, LLC

Principal Place of Business	Mailing Address
3482 MAIN HWY. COCONUT GROVE FL 33133	6101 BLUE LAGOON DRIVE #430 MIAMI FL 33126

☐ CHECK HERE IF MAKING CHANGES

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

4. FEI Number 65-1053628 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HERMAN, ALISON P C/O BREIER AND SETF, P.A. 2800 PONCE DE LEON BLVD #1125 CORAL GABLES FL 33134	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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR BARBARA, TIPO 6101 BLUE LAGOON DRIVE #430 MIAMI FL 33126	☒ Delete	MGR IRMA D'ANCONA 610 Blue Lagoon Dr. Suite #30 Miami, FL. 33126	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM LUIGI, TREGUA 6101 BLUE LAGOON DRIVE #430 MIAMI FL 33126	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM BOLIS, ROLAND M 6101 BLUE LAGOON DRIVE #430 MIAMI FL 33126	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E083 (10/02)

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: SIGNATURE REQUIRED 4/28/03

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

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Attachment 544003198

MIAMI UNO, LLC

L00000011924

April 28, 2003

Florida Department of State
Division of Corporations
Uniform Business Report (UBR)
P.O. Box 6478
Tallahassee, FL. 32314-6478

Re: Correction

To whom it may concern:

Please be advice that on the 28th April, 2003, we processed the UBR form an online payment for the following:

Entity Name: Miami UNO, LLC
Document #: L00000011924
FEI #: 65-1053628
Amount Paid: $ 55.00

Herewith find changes / additions that we did not include in the same, therefore, enclosed find the correct form and a copy of the online payment.

We appreciate your help, should you have questions related to this matter, do not hesitate to contact us.

Best regards,

Roland M. Bolis
Manager

RB/js

6101 BLUE LAGOON DR. SUITE 430 * MIAMI, FL 33126
TEL: (305) 262-6226 FAX: (305) 262-6255