

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 25, 2001 08:00 AM****Secretary of State****DOCUMENT # L00000015830****1. Entity Name**

AL &amp; AL INTERNATIONAL, L.L.C.

**Principal Place of Business**C/O JOSE R. PUIG, ESQ.  
600 BRICKELL AVE., STE. 200  
MIAMI  
331312520

FL

**Mailing Address**C/O JOSE R. PUIG, ESQ.  
600 BRICKELL AVE., STE. 200  
MIAMI  
331312520

FL

**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

**4. FEI Number****52-2288517**

Applied For

Not Applicable

**5. Certificate of Status Desired**☐**\$5.00** Additional  
Fee Required**6. Name and Address of Current Registered Agent**GUTIERREZ NICOLAS JESQ.  
1101 BRICKELL AVE., STE. 1400

MIAMI

33131

US

FL

**7. Name and Address of New Registered Agent**

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.**

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**04/25/2001**

DATE

**FILE NOW!!! FEE IS \$50.00****Make Check Payable to Department of State****9. MANAGING MEMBERS / MEMBERS****10. ADDITIONS / CHANGES**TITLE MGR ☐ Delete  
NAME LOTZ ALEJANDRO  
STREET ADDRESS 600 BRICKELL AVE., STE. 200  
CITY-ST-ZIP MIAMI FL 331312520TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE MGR ☐ Delete  
NAME LOPEZ ADRIAM F  
STREET ADDRESS 600 BRICKELL AVE., STE. 200  
CITY-ST-ZIP MIAMI FL 331312520TITLE ☐ Change ☐ Addition  
NAME  
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NAME  
STREET ADDRESS  
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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.****SIGNATURE: ADRIAN F LOPEZ**

MGR

04/25/2001

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

Date

Daytime Phone #

CR2E083 (11/00)