2

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

02-26-2002 90006 041 ****50.00

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DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000000926

1. Entity Name
R.T.L. EQUITIES, LLC

Principal Place of Business	Mailing Address
9350 SOUTH DIXIE HIGHWAY, SUITE 930 MIAMI FL 33156	9350 SOUTH DIXIE HIGHWAY, SUITE 930 MIAMI FL 33156

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 01-0652424 — 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
MIAMI CENTER REGISTERED AGENTS, INC. 201 BISCAYNE BLVD., SUITE 1700 MIAMI FL 33131	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) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE President NAME Y. Stephen Liedman STREET ADDRESS 9350 SOUTH Dixie Hwy #930 CITY-ST-ZIP Miami FL 33156	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE Vice President NAME MARK Levitats STREET ADDRESS 9350 SOUTH Dixie Hwy # 930 CITY-ST-ZIP Miami FL 33156	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE Secretary NAME Greg L Fine STREET ADDRESS 9350 SOUTH Dixie Hwy #930 CITY-ST-ZIP Miami FL 33156	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E083 (9/01)

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: Martin [illegible] Vice President 2/5/02 305 670-9595
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #