APR-25-02 04:27PM FROM-Rachlin Cohen & Holtz LLP 954-525-20

UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State
05-06-2002 90126 016 ****50.00

DOCUMENT # L01000007366

1. Entity Name
G+V FINANCIAL LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
11111 BISCAYNE BLVD.	11111 BISCAYNE BLVD
Suite, Apt. #, etc. BLDG I, STE. 2107	Suite, Apt. #, etc. BLDG I, STE. 2107
City & State MIAMI, FL	City & State MIAMI, FL
Zip 33181 Country	Zip 33181 Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1130285 — Applied For / Not Applicable

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

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7. Name and Address of Current Registered Agent
Name: Jack Goldstein, CPA
Street Address (P.O. Box Number is Not Acceptable): Rachlin Cohen & Holtz LLP, 450 East Las Olas Blvd. Ste. 950
City: Ft. Lauderdale FL Zip Code 33301

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] CPA 4/25/02
Signature, typed or printed name of registered agent and title if applicable. DATE

FEE IS $50.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE	President
NAME	Victoria Bradburn
STREET ADDRESS	11111 Biscayne Blvd., Bldg. I, Ste 2107
CITY-ST-ZIP	Miami, FL 33181
TITLE	Secretary/Treasurer
NAME	Geoffrey M. Risen
STREET ADDRESS	11111 Biscayne Blvd., Bldg I, Ste 2107
CITY-ST-ZIP	Miami, FL 33181
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E083B (12/01)

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: [signature] April 25/2002 305-891-1660
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #