FILED
Jun 11, 2003 8:00 am
Secretary of State
03-12-2003 90010 008 ****50.00

3/12/

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000000537

1. Entity Name

OTMD HOLDING, L.L.C.

44004204

[redacted]

☒ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
135 WEST 49 STREET HIALEAH FL 33012	601 BRICKELL KEY DRIVE, SUITE 507 C/O IVAN A GOMEZ, P.A. MIAMI FL 33131

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 applied for ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

IAG CORPORATE SERVICES, INC
601 BRICKELL KEY DRIVE, SUITE 507
MIAMI FL 33131

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. 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	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Manager Orlando F. Torres 135 West 49th Street Hialeah, Florida 33012
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Member Orlando S. Torres 135 West 49th Street Hialeah, Florida 33012
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Member Elba Torres 135 West 49th Street Hialeah, Florida 33012
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ 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
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ 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 2-25-03 (305)371-9213
Orlando F. Torres, Manager
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER, MANAGER, RECEIVER, TRUSTEE OR OTHER AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

Attachment 44 004204
#L02000000537

LAW OFFICES
IVAN A. GOMEZ. P.A.
COURVOISIER CENTRE II
601 BRICKELL KEY DRIVE • SUITE 507
MIAMI, FLORIDA 33131-2623
(305) 371-9213
TELECOPIER (305) 358-4658

IVAN A. GOMEZ
BOARD CERTIFIED TAX ATTORNEY

May 7, 2003

Corporate Records Bureau
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32301

Re: OTMD Holding, L.L.C.

Dear Sir/Madam:

This letter is in connection to the correspondence that we receive regarding the above referenced matter. We have made the changes requested on your letter, dated April 30th, 2003. Please update your file.

If you have any questions concerning this matter, please do not hesitate to contact me.

Very truly yours,

I/S

Ivan A. Gomez

IAG/ys
F:\WPDOCS\OTMD Holding, L.L.C\Div.Corp.L.02.wpd
Encl.