## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000034079



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Date

Daytime Phone #

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2. Principal F	Place of Business	-larat	3. Mailing Address	or kin	con l			
Suite, Apt.	2- 1011	<del>z</del> way	Suite, Apt. #, etc.	VI) 1-14	-e-y	DO NOT WRIT	E IN THIS SPACE	
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	Miami Be	ach, FL	4. Miami	Bear	h TL	4. FEI Number 55-08112	62 Not	ied For Applicable
Zip	3140 Cou	USA	Zip 33160	Country	USA"	-5. Certificate of Status Désired	55.00-Addition	<del></del>
		O. DA				7. Name and Address of Current I	Fee Required Registered Agent	
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					City	iami Bench	FL Zip Code	27/27
8. The above	named entity submi	its this statement for t	ne purpose of changing its	registered		ed agent, or both, in the State of Flor		1 accept
the obligati	ions of registered ag	ngnt. U (	•			•		, 4000ps
SIGNATURE	Signature, typed or printed	name of registered agent and	title if applicable.			<del></del>	DATE	
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11. I hereby ce	ertify that the informa	ation supplied with this	filing does not qualify for t	the everneti	ion stated in Cont	ion 119.07(3)(i), Florida Statutes. I fu	rther certify that the inform	nation
illuloateu t	211 KIIS IEDOLLIS KUE I	anu accurate ano ina	my signature shall have the control of the control	ie saille leu	iai elleci as n mar	18 UDGer oath: that I am a managing	member or manager of	the

E AND PYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE