

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030996

**FILED**  
**Mar 24, 2007**  
**Secretary of State**

**Entity Name:** REFLECTIONS INVESTMENT NO. 6345, LLC

**Current Principal Place of Business:**

PO BOX 650522  
MIAMI, FL 33265 US

**New Principal Place of Business:**

6345 COLLINS AVE  
#931  
MIAMI BEACH, FL 33141 US

**Current Mailing Address:**

PO BOX 650522  
MIAMI, FL 33265 US

**New Mailing Address:**

**FEI Number:** 20-0161571      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

VALDES, FERNANDO  
9440 SW 102ND AVENUE  
MIAMI, FL 33165 US

**Name and Address of New Registered Agent:**

VALDES, FERNANDO E  
6345 COLLINS AVE  
#931  
MIAMI BEACH, FL 33141 US

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: FE VALDES

03/24/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: VALDES, FERNANDO  
Address: 3111 SOUTHWEST 102 AVENUE  
City-St-Zip: MIAMI, FL 33165 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: VALDES, FERNANDO E  
Address: 6345 COLLINS AVE  
City-St-Zip: MIAMI BEACH, FL 33141 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: FE VALDES

P

03/24/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date