

L09000122107

Division of Corporations

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Florida Department of State

Division of Corporations

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**REGISTERED AGENT, REGISTERED OFFICE & REGISTERED
AGENT'S SIGNATURE:**

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent Signature:

Lilia Lasprilla

LILIA P. LASPRILLA

441 Madeira Avenue

Coral Gables, FL 33134

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