Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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3052201440 From: Receptionist 1

Fex: (785) 233-3529

Fex: +1 (305) 2201440

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## ARTICLE I - Name:

The name of the Limited Liability Company is: One end with the words "Limited Liability Company,

Reel Adjustment LLC. <u> ARTICI E II - Addressi</u> The mailing address and street address of the principal office of the Limited Liability Company is: 8w 64 Terrace

Miani, Florida 33193

# ARTICLE III - Registered Agent, Registered Office:

To:

The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an tudividual or another business entity with an active Florida registration.)

Affordable Legal & Accounting Services LLC 10300 SUNSET Drive, Suite 140 Miami, Florida 33193

### ARTICLE IV-

The name and title of each person authorized to manage and control the Limited Liability Company:

1. Juan Antonio Mourin (AMBR) 2. Marlene Mourin (AMBR)

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From: Receptionist 1

Fax: (795) 233-9528

3052201440

Fax: +1 (305) 2201440

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# Remired Signatures:

Signature of a member of an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

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 605, F.S..

store (REQUIRED)

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