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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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:	Division of Co	rnovetione	33.€
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	Fax Number	: (850)617-6381	A
From:			
	Account Name	: TRAMILEX LLC	33
	Account Number	: 120150000086	ت،بينَ
<b>22</b> 25 - 20	Phon <b>e</b>	: (786)469-9163	
<ul><li>(4) (2) (2) (2) (3) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4</li></ul>	Fax Number	: (305)848-3716	0.00
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# FLORIDA LIMITED LIABILITY CO. BRIGHTPHONE LLC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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# H160002440973

#### COVER LETTER

	Registration Section Division of Corporations	
SUBJECT	BRIGHTPHONE LLC.	
SUBJEC	- ·	d Liability Company
The enclos	sed Articles of Organization and fee(s) are so	abmitted for filing.
Please reta	um all correspondence concerning this matte	r to the following:
	DIEGO A. RODRIGUEZ BRAVO	· ·
	1	Name of Person
	BRIGHTPHONE LLC	
		Firm/Company
	20533 BISCAYNE BLVD #1105	•
		Address
	AVENTURA, FL 33180	
	Citys tramilexile@gmail.com	State and Zip Code
	E-mail address: (to be used for	future annual report notification)
For further i	information concerning this matter, please ca	и:
	DIEGO A RODRIGUEZ 305	848-3716
	Name of Person Area	Code Daytime Telephone Number
Enclosed i	is a check for the following amount:	
\$125.00 F	Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy additional copy is enclosed)  Certified Copy (additional copy is enclosed)
	Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314	Street Address  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301

### H16000244097 3

The name of the Limited L	lability Company is:			
BRIGHTPHON				
(Mus	t end with the words "Limited	Liability Company	y, "L.L.C.," or "LLC.")	- <b>-</b>
ARTICLE II - Address:				
The mailing address and st	reet address of the principal or	ffice of the Limited	Liability Company is:	
Pr	incipal Office Address:		Mailing Address:	
	AVE SUITE 500	205	33 BISCAYNE BLVD #1105	
MIAMI, FL 33	179	AV	ENTURA, FL 33180	_
The Limited Liability Connother business entity with	ed Agent, Registered Office, on a month of the common serve as its own the an active Florida registration street address of the registered	Registered Agent. n.)	nt's Signature: You must designate an individual or	_
The Limited Liability Connother business entity with	npany cannot serve as its own th an active Florida registration	Registered Agent. n.) agent are:	nt's Signature: You must designate an individual or	
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Page 1 of 2

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SECHETARY OF STATE

## 4160002440973

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	DIEGO A RODRIGUEZ BRAVO
	20533 BISCAYNE BLVD #1105_
	AVENTURA, FL 33180
AMBR	BRIGHTPHONE S.A DE CV
	DARWIN #30 PISO 5 COL NUEVA ANZURES
•	DEL, MIGUEL HIDALGO CDMX
(Use attachment if necessary)	
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