To: 16506176381 From: 14693173436 Date: 05/26/20 Time: 8:58 PM Page: 01/03

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 Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

Help

FLORIDA LIMITED LIABILITY CO. C.O. Florida LLC

Certificate of Status Certified Copy 0 03 Page Count Estimated Charge **S125.00**

Electronic Filing Menu Corporate Filing Menu

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are.

LEGALINC CORPORATE SERVICES INC.
Name

5237 SUMMERLIN COMMONS BLVD, SUITE 400

Florida street address (P.O. Box NOT acceptable)

FORT MYERS, FL 33907
City State Zip

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..

Registered Agent's Signature (REQUIRED

(CONTINUED)

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ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Miguel Contreras
AWIDK	19431 Franjo Rd
	Cutler Bay, FL, US, 33157
AMBR	Juan Contreras
	19431 Franjo Rd., Cutler Bay, FL, US, 33157
	Carrier May, 1 12, Obj. 22427
	
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