5/16/22, 11:27 AM

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : ALEX PINA CO.
Account Number : I20190000095
Phone : (305)803-8471
Fax Number : (305)602-3977

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

Email Address: client@alexpina.co

022 KAY 16 PH 2

FLORIDA LIMITED LIABILITY CO. PRO-MEDIA BUSINESS & CONSULTANCY LLC

 Certificate of Status
 0

 Certified Copy
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 Page Count
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Corporate Filing Menu

Help

ARTICLES OF ORGA	NIZATION FOR FI	ORIDA LIMITED	HABILTIY	COMPANY
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ARTICLE I - Name:

The name of the Limited Liability Company is:

PRO-MEDIA BUSINESS & CONSULTANCY LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
501 NE 14TH AVE UNIT 607	501 NE 14TH AVE UNIT 607
HALLANDALE BEACH, FL 33009	HALLANDALE BEACH, FL 33009

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:

City	State	Zip
DORAL	FL	33166
Florida street addres	s (P.O. Box <u>NOT</u> ac	cceptable)
8400 NW 36TH ST	STE 450	
	Name	
ALEX PINA CO.		

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)

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)

Title:	Name and Address:	
"AMBR" = Authorized "MGR" = Manager	Member	
MGRM	ANIBAL I ORTA DEL PINO	
MCHGM	501 NE 14TH AVE UNIT 607	
	HALLANDALE BEACIL FL 33009	
	_	
		
		
(Use attachment if nece		
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PRO-MEDIA BUSINESS & CONSULTANCY LLC

L17000077040

May 13, 2022

Re: Statement of Name Release.

Dear Administration,

I, Anibal J Orta Del Pino, confirm that PRO-MEDIA BUSINESS & CONSULTANCY LLC - L17000077040 will not be reinstated and therefore we release the use of the name to another entity.

Respectfully.

Anibal J Orta Del Pino

2022 MAY 16 PM 2: 12