2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # ⌐L99000004037

1. Entity Name

ONLY CLEAR SKIES, L.L.C.

Principal Place of Business	Mailing Address
2914 NW 72ND AVENUE MIAMI FL 33122	5141 NW 116 COURT MIAMI FL 33178

DO NOT WRITE IN THIS SPACE **MJH**

2. Principal Place of Business	3. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State	**4. FEI Number** 65-0933378	Applied For / Not Applicable
Zip / Country	Zip / Country	**5.** Certificate of Status Desired ☐	**$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GUTIERREZ, OSCAR ROJAS 999 BRICKELL AVENUE SUITE 700 MIAMI FL 33131	Name ____ Street Address (P.O. Box Number is Not Acceptable) ____ City ____ FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE Registered Agent signature required when reinstating)

DATE

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-05/31/01--01086--001
*****50.00 *****50.00

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State

9.	MANAGING MEMBERS / MEMBERS		10.		ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GUTIERREZ, OSCAR ROJAS 999 BRICKELL AVENUE SUITE 700 MIAMI FL 33131	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _O. OSCAR Rojas Gutierrez_   04-29-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #