Certificate of Sta

**Current Principal Place of Business:** 

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

11120 NORTH KENDALL DR, STE 201 MIAMI, FL 33176

Entity Name: BRICKELL GATE INC.

DOCUMENT# P01000044839

#### **Current Mailing Address:**

P.O. BOX 450953 MIAMI, FL 33245

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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:

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

Title	PD	Title	VD
Name	PEREZ, MANUEL	Name	PEREZ, GUADALUPE
Address	11120 NORTH KENDALL DR, STE 201	Address	11120 NORTH KENDALL DR, STE 201
City-State-Zip:	MIAMI FL 33176	City-State-Zip:	MIAMI FL 33176

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PD

## SIGNATURE: MANUEL PEREZ

Electronic Signature of Signing Officer/Director Detail

atus Desired: No

03/08/2021

Date

Date