### **2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000111721 Entity Name: G.M.A.'S, LLC

**FILED** Mar 17, 2021 **Secretary of State** 8763756257CR

# **Current Principal Place of Business:**

20200 WEST DIXIE HWY SUITE 902

AVENTURA, FL 33180

# **Current Mailing Address:**

20200 WEST DIXIE HWY SUITE 902 AVENTURA, FL 33180 US

**FEI Number: APPLIED FOR** Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

SOPHIA, WILLIAMS 20200 WEST DIXIE HWY SUITE 902 AVENTURA, FL 33180 US

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: SOPHIA WILLIAMS 03/17/2021

> Electronic Signature of Registered Agent Date

#### Authorized Person(s) Detail:

**AUTHORIZED MEMBER** Title WILLIAMS, SOPHIA Name 20200 WEST DIXIE HWY Address

SUITE 902

City-State-Zip: AVENTURA FL 33180

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SOPHIA WILLIAMS AUTHORIZED MEMBER Electronic Signature of Signing Authorized Person(s) Detail

03/17/2021

Date