I hereby certify that the information indicated on this report or supplemental report is true and accur	rate and that my electronic signature shall have the sa	me legal effect as if made under
oath; that I am a managing member or manager of the limited liability company or the receiver or the	ustee empowered to execute this report as required b	y Chapter 605, Florida Statutes; and
that my name appears above, or on an attachment with all other like empowered.		
SIGNATURE: MARI ON RAMIREZ	OWNER	07/21/2018

Electronic Signature of Signing Authorized Person(s) Detail

	······································						
SIGNATURE:	MARLON RAMIREZ						
	Electronic Signature of Registered Agent						
Authorized Person(s) Detail :							
Title M	MGR	Title	OWNER				
Name S	SAYUS, SURIA	Name	RAMIREZ, MARLON				

SIGNATURE:	MARLON RAMIREZ			07/21/2018				
	Electronic Signature of Registered Agent			Date				
Authorized Person(s) Detail :								
Title	MGR	Title	OWNER					
Name	SAYUS, SURIA	Name	RAMIREZ, MARLON					
Address	1525 PICARDY CIR	Address	1525 PICARDY CIR					

1525 PICARDY CIR CLEARWATER, FL 33755 US

City-State-Zip: CLEARWATER FL 33755

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.

Current Mailing Address:

CLEARWATER, FL 33755 US

FEI Number: 81-1330762

Name and Address of Current Registered Agent:

1525 PICARDY CIR

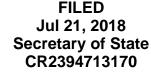
RAMIREZ, MARLON

2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT DOCUMENT# L16000025080

Entity Name: MARLON RAMIREZ ENTERPRISES LLC

Current Principal Place of Business:

1646 TILLEY AVE UNIT B CLEARWATER, FL 33756



Certificate of Status Desired: No

City-State-Zip: CLEARWATER FL 33755

OWNER

Date