

L18000 114387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

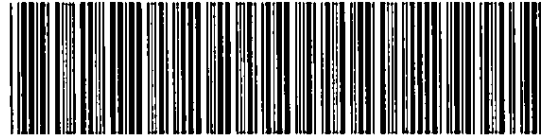
(Business Entity Name)

(Document Number)

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5/29/18

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 18320 NW 5TH AVE LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROLAND LOUIS  
Name of Person  
  
Firm/Company  
18320 NW 5TH AVE  
Address  
MIAMI GARDENS, FLORIDA 33169  
City/State and Zip Code  
ROLOUIS3@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

2019 MAY 18 A 0:13

For further information concerning this matter, please call:

ROLAND LOUIS 305 647-9279  
Name of Person at ( ) Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|--|---|--|

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

18320 NW 5TH AVE LLC

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ROLAND LOUIS	511 IVES DAIRY RD	<input checked="" type="checkbox"/> Add
		APT 201	<input type="checkbox"/> Remove
		MIAMI, FLORIDA 33179	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2017-11-18 ✓ 3

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated MAY 15TH 2018

ROLAND LOUIS

Typed or printed name of signee