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T. MATTHEWS

APR 11 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FIGALFAM1-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:

MONICA PENA

Name of Person

Firm/Company

5763 NW 99 PLACE

Address

DORAL, FLORIDA 33178.

City/State and Zip Code

monicapena0318@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MONICA PENA

786

356-0845

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &
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\$55.00 Filing Fee &
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\$60.00 Filing Fee,
Certificate of Status &
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(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Blank lined area for amending information, crossed out with a diagonal line.

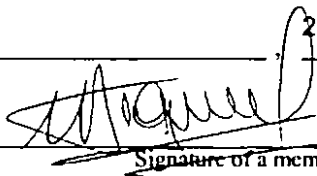
E. Effective date, if other than the date of filing: 2/15/2022 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated MARCH 25th 2022



Signature of a member or authorized representative of a member

MARIO P. FIGUEROA

Typed or printed name of signee