

L14000065702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

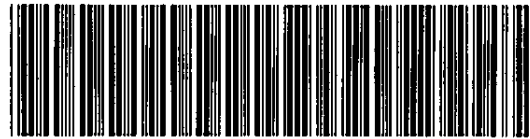
(Business Entity Name)

(Document Number)

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B. BOSTICK

MAY 21 2014

EXAMINED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: REY ADVISORS 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:

Rodrigo Andres Rey Rodriguez

Name of Person

Rey Advisors LLC

Firm/Company

601 Lyons Rd Suite 7205

Address

Coconut Creek, FL 33063

City/State and Zip Code

andres-afi@live.com

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

For further information concerning this matter, please call:

Rodrigo Andres Rey Rodriguez at **561** **6997661**

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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	Rodrigo Andres Rey Rodriguez	601 Lyons Road Ste 7205	<input type="checkbox"/> Add
		coconut Creek, FL 33063	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 30, 2014

Signature of a member or authorized representative of a member

Rodrigo Andres Rey Rodríguez

Typed or printed name of signee