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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Coconut Grove Partners, 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:
A / / A = == /= == 0
Aldo Marchena (Name of Person)
(Name of Person)
Coconuct Grove Partners, LLC (Firm/Company)
(Firm/Company)
12904 SW 10320 Ct.
(Address)
12904 SW 10320 Ct. (Address) Miami, FL 33176
(City/State and Zip Code)
For further information concerning this matter, please call:
,
Aldo Marchena = 954, 662-9050
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee \text{ Certified Copy (additional copy is enclosed)}} \text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} Certified Copy (addit
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MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section
Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 Control of Corporations Clifton Building Tallahassee, FL 32314 Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Present Name)
(A Florida Limited Liability Company)

Coconut Grove

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Filing Fee: \$25.00