

L 05000086679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

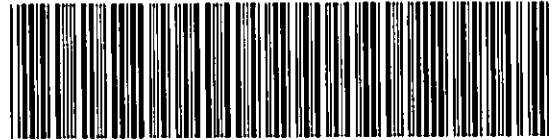
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/02/18 - 01000 - 017 \*550.00

FILED

18 OCT -5 PM 10:59

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

S. YOUNG

OCT 16 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 9, 2018

DANIELA CRISTINA GARRIDO  
ONSET PRODUCTS & TECHNOLOGIES, LLC  
9805 NW 52ND STREET STE 405  
MIAMI, FL 33178

SUBJECT: ONSET PRODUCTS & TECHNOLOGIES, LLC  
Ref. Number: L05000086679

We have received your document for ONSET PRODUCTS & TECHNOLOGIES, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young  
Regulatory Specialist II

Letter Number: 018A00016388

RECEIVED  
18 OCT -5 AM 10:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
18 OCT -5 PM 11:00  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ONSET PRODUCTS & TECHNOLOGIES, 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:

DANIELA CRISTINA GARRIDO

Name of Person

ONSET PRODUCTS & TECHNOLOGIES, LLC

Firm/Company

9805 NW 52ND STREET STE 405

Address

MIAMI, FL 33178

City/State and Zip Code

onsetproducts@gmail.com

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

FILED  
18 OCT -5 PM 11:00  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

DANIELA CRISTINA GARRIDO

786 210 - 6278  
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 &  
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 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>
MBR	GARRIDO, DANIELA CRISTINA	9805 NW 52ND ST STE 405	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33178	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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FILED  
18 OCT 05 PM 1:00  
TALLAHASSEE, FLORIDA

FILED  
18 OCT -5 PM 11:00  
TALLAHASSEE, FLORIDA

FILED  
18 OCT -5 PM 11:00  
TALLAHASSEE, FLORIDA

(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)

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 September 27th, 2018

Signature of \_\_\_\_\_

Signature of a member or authorized representative of a member

DANIELA CRISTINA GARRIDO

Typed or printed name of signee