

LD5000087654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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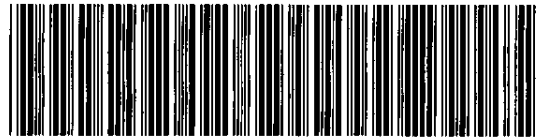
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Office Use Only

G. MCLEOD

JAN - 7 2009

EXAMINER



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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
JAN - 5 PM 2:07

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Samy Holdings, 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:

Jessica Davis

(Name of Person)

(Firm/Company)

7344 SW 48 St., #203, Miami, FL 33155

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person)

at ( )

(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

Samy Holdings, LLC

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Marta Arellano	7344 SW 48 St., #203, Miami, FL 33155	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Jessica Davis	7344 SW 48 St., #203, Miami, FL 33155	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated December 30th, 2008, \_\_\_\_\_.

Marta Arellano  
Signature of a member or authorized representative of a member  
  
Marta Arellano  
Typed or printed name of signee