

LO60000 14887

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200348545032

RECEIVED
07/22/20--01007-028-14887.00
JUL 15 2020

07/22/20
14887

07/22/20
14887

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: OCEAN MUNDO 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:

CESAR OLIVEROS

Name of Person

OCEAN MUNDO LLC

Firm/Company

4940 NW 83RD PATH

Address

DORAL, FL 33166

City/State and Zip Code

CEO@GMACCOUNTINGSOLUTION.COM

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

For further information concerning this matter, please call:

CESAR OLIVEROS

786

370-3372

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 Address:

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

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

[illegible]

(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.

Lawrence

CESAR J T OLIVEROS

Filing Fee: \$25.00