

LO7 000079549

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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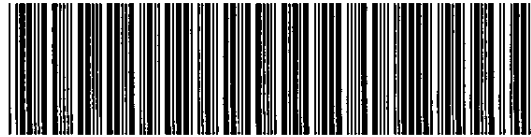
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

OCT 26 2012

EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: ADRIANA GARCIA GUERRERO 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:

ADRIANA VILLARREAL

Name of Person

ADRIANA GARCIA GUERRERO LLC

Firm/Company

3340 GRAND CYPRESS DR NO 202

Address

NAPLES FL 34119

City/State and Zip Code

agarcia90@comcast.net

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

For further information concerning this matter, please call:

ADRIANA VILLARREAL

Name of Person

at (239)

821-2790

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

SECRETARY OF STATE
TALLAHASSEE, FL 32301

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ADRIANA GARCIA GUERRERO 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>
MGR	ADRIANA GARCIA	3340 GRAND CYPRESS DR NO 202 NAPLES FL 34119	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	ADRIANA VILLARREAL	3340 GRAND CYPRESS DR NO 202 NAPLES FL 34119	<input checked="" 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
			<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 OCTOBER 22, 2012

Adriana Garcia

Signature of a member or authorized representative of a member

ADRIANA GARCIA

Typed or printed name of signee

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