

LO9000014799

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

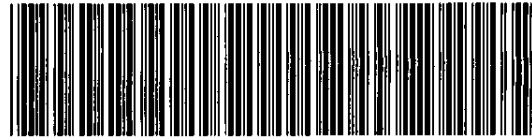
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800199799238

04/04/11--01029--016 **25.00

FILED
11 APR -4 AM 11:18
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

B. BOSTICK

APR 5 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SANDCHRIS UNIVERSAL MANAGEMENT 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:

Wagner Sandoval

Name of Person

SANDCHRIS UNIVERSAL MANAGEMENT LLC

Firm/Company

2295 S.Hiawassee Rd Suite 201-C

Address

Orlando Florida 32835

City/State and Zip Code

Wagnerdiscovery@gmail.com

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

For further information concerning this matter, please call:

Wagner Sandoval

Name of Person

at (321)

5271604

Area Code & Daytime Telephone Number

11 APR -4 AM 11:10
RECEIVED
TALLAHASSEE, FL 32301
STATE OF FLORIDA
SECRETARY OF STATE

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 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:

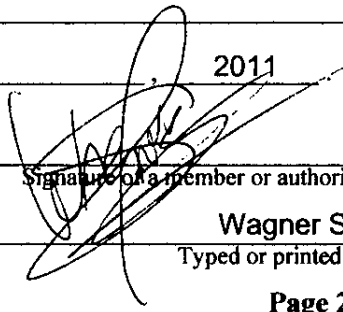
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Natalie Nicholas	3392 Westchester Sq Blvd 203 Orlando Florida 32835	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Wagner Sandoval	3392 Westchester Sq Blvd 203 Orlando Florida 32835	<input 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.)

FILED
 11 APR - 1 AM 11:18
 TALLAHASSEE, FLORIDA

Dated 04/01 2011



Signature of a member or authorized representative of a member

Wagner Sandoval

Typed or printed name of signee