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4281105

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** ILAN WAY, 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:

RUBEN ZURGA

\_\_\_\_\_  
Name of Person

MIAMI ACCOUNTING & TAX SERVICES LLC

\_\_\_\_\_  
Firm/Company

13899 BISCAYNE BLVD PH9

\_\_\_\_\_  
Address

NORTH MIAMI BEACH, FL 33181

\_\_\_\_\_  
City/State and Zip Code

RUBEN@MIATAX.COM

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

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

RUBEN ZURGA

786 657-2521  
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

## ILAN WAY LLC

Page 1 of 3

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>
MGR	GIANNICO, MAURO EZEQUIEL	2963 NW 33RD WAY	<input checked="" type="checkbox"/> Add
		Lauderdale Lakes, FL 33311	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	MENDEZ, PABLO D	13899 BISCAYNE BLVD PH9	<input type="checkbox"/> Add
		North Miami Beach, FL 33181	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	HERMS DE MENDEZ, MARIA	13899 BISCAYNE BLVD PH9	<input type="checkbox"/> Add
		North Miami Beach, FL 33181	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	MENDEZ, DIEGO I	13899 BISCAYNE BLVD PH9	<input type="checkbox"/> Add
		North Miami Beach, FL 33181	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(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.

  
Signature of a member or a

Signature of a member or authorized representative of a member

Typed or printed name of signee