

L09000062784

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

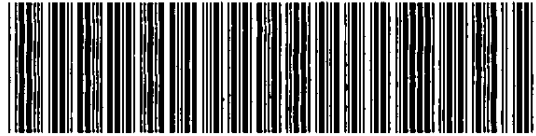
(Business Entity Name)

(Document Number)

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REC'D.  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

T. HAMPTON

DEC 23 2009

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: UNLIMITED MANAGEMENT & ASSOCIATES, 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:

MARIA ALEJANDRA CATTANI

Name of Person

UNLIMITED MANAGEMENT & ASSOCIATES, LLC

Firm/Company

8009 NW 36 STREET # 210 ,

Address

MIAMI, FL 33166

City/State and Zip Code

MACATTANI@GMAIL.COM

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

For further information concerning this matter, please call:

MARIA ALEJANDRA CATTANI

Name of Person

at ( 305 )

562-0846

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

## UNLIMITED PROPERTY MANAGEMENT &amp; ASSOCIATES, 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         | JOSE R RUIZ | 8009 NW 36 STREET# 210<br>MIAMI, FL 33166 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
| WEL          | ELVIA LUZO  | 8009 NW 36 St #210<br>Miami FL 33166      | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
|              |             |                                           | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |             |                                           | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |             |                                           | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |             |                                           | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

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

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

Dated

12/17/09



Signature of a member or authorized representative of a member

MARIA ALEJANDRA CATTANI

Typed or printed name of signee

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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