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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S. HAWKES

FEB 26 2010

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Rogue Records 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:

Rique Alonso

Name of Person

Rogue Records LLC

Firm/Company

3550 Biscayne Blvd., Ste. 310

Address

Miami, FL 33137

City/State and Zip Code

RiqueA@comcast.net

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

For further information concerning this matter, please call:

Rique Alonso

Name of Person

at ( 305 )

914-4120

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

Rogue Records LLC

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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	Daryl M. Tirico	515 Seabreeze Blvd. Ft. Lauderdale, FL 33316	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Carlos A. Galavis	6828 NW 12 Ct. Plantation, FL 33313	<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

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

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

Dated February 24, 2010

\_\_\_\_\_  
Signature of a member or authorized representative of a member  
Joseph Maenza for Rogue Records LLC  
\_\_\_\_\_  
Typed or printed name of signee