

LI0000005861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

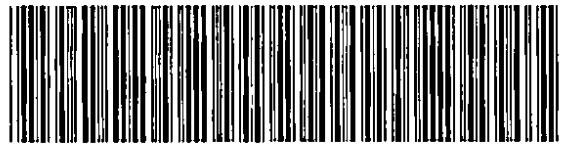
(Business Entity Name)

(Document Number)

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J. J. EGGETT  
JUN 20 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 4, 2018

CORINE LANDEAU  
319 NE 59TH TER, STE 319  
MIAMI, FL 33137 US

SUBJECT: MARLAND HOLDINGS, LLC.  
Ref. Number: L10000005861

We have received your document for MARLAND HOLDINGS, LLC. and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Judy A Leggett  
Regulatory Specialist II  
Registration Section

Letter Number: 218A00011501

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2018 JUN 18 PM 3:07  
DEPARTMENT OF  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** MARLAND HOLDINGS, 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:

CORINE LANDEAU

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

MARLAND HOLDINGS, LLC

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

319 NE 59th TER, SUITE 319

\_\_\_\_\_  
Address

MIAMI, FL 33137

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

marland.miami@gmail.com

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

For further information concerning this matter, please call:

CORINE LANDEU / CAMILA LEYTON

786 360 1198  
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



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>
AMBR	JULIEN LANDEAU	319 NE 59th TER, SUITE 319. MIAMI, FL 33137. US	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	GUILLAUME LANDEAU	319 NE 59th TER, SUITE 319. MIAMI, FL 33137. US	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated June 11th, 2018

CORINE LANDEAU

**Filing Fee: \$25.00**