

LI 000000 29399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

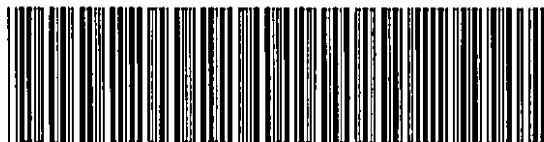
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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08/26/20 01010--001 \*3 01.00

2020 OCT 26 PM 6:24

NOTATIONS

OCT 09 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Marubego LLC. 2020-01-25 PM 5:24  
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 Ruggeri  
Name of Person

MARUBEGO LLC.  
Firm/Company

7544 NW. 98th CT.  
Address

DORAL, FL 33178  
City/State and Zip Code

MARUBEGO LLC @ GMAIL.COM  
E-mail Address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIA Ruggeri at ( 786 ) 3405869.  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|---|--|--|

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**If Changing Registered Agent, Signature of New Registered Agent**

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

2:20 PM 6/24

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
ANBR	MARIA JOSE MARIN	11439 NW 74 Ter, DORAL FL 33178	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MARIA PAULA MARIN	7544 NW 98 <sup>th</sup> Ct, Doral, FL 33178	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

6-24

(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.

Dated

08-18-11-2020

Signature of a member or authorized representative of a member

José Francisco Marino

Typed or printed name of signee