

**L10000046329**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

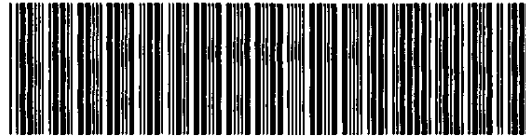
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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08/05/11--01027--010 \*\*43.75

08/30/11--01001--011 \*\*11.25

FILED

2011 AUG 30 AM 9:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS  
AUG 31 2011  
EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 8, 2011

ELENA BONDARENKO  
PRIVATE ALLIANCE LLC  
1508 BAY ROAD, #357  
MIAMI BEACH, FL 33139

SUBJECT: PRIVATE ALLIANCE, LLC  
Ref. Number: L10000046329

We have received your document for PRIVATE ALLIANCE, LLC and check(s) totaling \$43.75 of which \$43.75 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$11.25 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any further questions concerning your document, please call (850) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 011A00018560

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: PRIVATE ALLIANCE 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:

Elena Bondarenko  
Name of Person

Private Alliance LLC  
Firm/Company

1508 Bay Road #357  
Address

Miami Beach, FL 33139  
City/State and Zip Code

MUSSSS1@yandex.RU  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elena Bondarenko at 305 934-0142  
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

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TALLAHASSEE, FLORIDA  
(ds.)

**(Name of the Limited Liability Company as it now appears on our records.)**  
(A Florida Limited Liability Company)

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

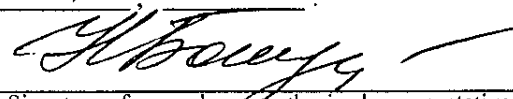
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	NELSON A. FANDINO	7456 SW 111th Miami FL 33173	<input checked="" 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.)

N/A

Dated 08.23.2011



Signature of a member or authorized representative of a member

Bondarenko Nikolay

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 AUG 30 AM 9:45

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