

L10000090016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

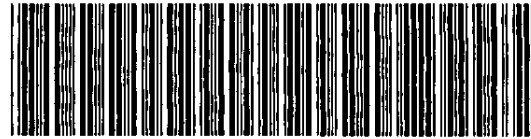
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600248687906

06/07/13--01014--010 **60.00

2013 JUN -7 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

JUN 10 2013

D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Anoris International 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:

Luis J Garcia

Name of Person

Anoris International LLC

Firm/Company

8508 Andover Bridge Ct.

Address

Orlando, FL. 32829

City/State and Zip Code

homelui@gmail.com

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

For further information concerning this matter, please call:

Luis J Garcia

Name of Person

at **(321) 276 6980**

Area Code & Daytime Telephone Number

FILED
2018 JUN -7 PM 12:46
TALLAHASSEE FLORIDA
SECRETARY OF STATE

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 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	Hector Buxade	8508 Andover Bridge Ct.	<input type="checkbox"/> Add
		Orlando, FL. 32829 US	<input checked="" 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED
 2018 JUN - 22 PM 12:46
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

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

Dated June 4th, 2013.


Signature of a member or authorized representative of a member

Luis J Garcia

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED

2013 JUN - 7 PM 12:46

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**