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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 OCT 15 PM 2:26

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J. SAULSBERRY
EXAMINER

OCT 18 2010

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Inca Life Products 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:

Doris Bodet

Name of Person

Firm/Company

8800 nw 5th st

Address

Pembroke Pines FL 33024

City/State and Zip Code

db4eba23@yahoo.com

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

For further information concerning this matter, please call:

Doris Bodet

Name of Person

at (**954**)

584-8940

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

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INCA LIFE PRODUCTS LLC

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	DORIS BODET	8800 NW 5TH ST PEMBROKE PINES FL33024	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	DIANA RABANAL	149 morris dr east meadow ny 11554	<input type="checkbox"/> Add <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

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated September 17, 2010

Doris Bodet
Signature of a member or authorized representative of a member

DORIS BODET
Typed or printed name of signee