

L100001113 16

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

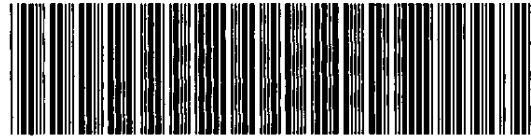
(Business Entity Name)

(Document Number)

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T. CLINE

NOV - 9 2010

EXAMINER

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 NOV - 8 AM 11:47

FILED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SAN FRANCISCO INVESTMENT IV 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:

MICHAEL MELENDEZ

Name of Person

MELENDEZ VEGA, LLC

Firm/Company

10511 N KENDALL DR SUITE C-203

Address

MIAMI, FL 33176

City/State and Zip Code

MICHAEL@MELENDEZVEGA.COM

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

For further information concerning this matter, please call:

MICHAEL MELENDEZ

Name of Person

at ( 305 )

271-5841

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

FILED  
2018 NOV -8 AM 10:47  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE



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>
	N/A		<input type="checkbox"/> Add <input type="checkbox"/> Remove
	N/A		<input type="checkbox"/> Add <input type="checkbox"/> Remove
	N/A		<input type="checkbox"/> Add <input type="checkbox"/> Remove
	N/A		<input type="checkbox"/> Add <input type="checkbox"/> Remove
	N/A		<input type="checkbox"/> Add <input type="checkbox"/> Remove
	N/A		<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated Nov 3, 2019



Signature of a member or authorized representative of a member

FRANCISCO J CORREA, MANAGER

Typed or printed name of signee

FILED  
2019 OCT 8  
TALLAHASSEE, FLORIDA  
CLERK OF COURT  
JULIA A. HARRIS