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COVER LETTER

TO: **Registration Section** Division of Corporations

DURANGO HOLDINGS LLC

SUBJECT: _____

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Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Amendment or Cancellation of Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Xabier Achurra

Name of Person

Durango Holdings, LLC

Firm/Company

1023 Tupelo Way

Address

Weston, Fl. 33327

City/State and Zip Code

xachurra@hotmail.com

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

For further information concerning this matter, please call:

Xabier Achurra	954	2240534
	at ()	
Name of Person	Area Code	Daytime Telephone Number

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

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AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY

Pursuant to section 605.0302(2), Florida Statutes, this limited liability company submits the following:

SECON	D: The Florida Document number of the limited liab	ility company is:		
THIRD:	The street address of the limited liability company' 1023 Tupelo Way,	s principal office is:		
•	Weston. Fl. 33327		_	
	The mailing address of the limited liability compares 1023 Tupelo Way,	ny's principal office is:	2021 JUN -	
•	Weston, Fl. 33327		3 AM	1
FOURT FIFTH: DR	H: The date the statement of authority became effect The statement of authority is cancelled.	tive is:	5	
	The amendment to the statement of authori The Managers. Xabier Achurra Suarez and/or Amel	•		
•	authorized to sign all and any documents in regards to Durango Holdings. LLC		_	
		Xabier Achurra Suarez	_	
signature	of authorized representative	Typed or printed name	of signature	
/	Filing Fee:	\$25.00 : \$30.00 (optional)		

CR2E145 (2/14)