

# LI1000053588

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

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

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

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

☐

PICK-UP

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

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(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 MAY 16 PM 12:35

N. Gulligan MAY 17 2011

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PREFERRED REALTY AND ASSOCIATES, 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:

HAYDEE CEBALLOS, CPA

Name of Person

SUAREZ CEBALLOS ORTIZ & VEGA, CPA'S

Firm/Company

354 SEVILLA AVE

Address

CORAL GABLES, FL 33134

City/State and Zip Code

HAYDEE@SCOVCPAS.COM

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

For further information concerning this matter, please call:

HAYDEE CEBALLOS, CPA

Name of Person

at ( 305 )

448-5255

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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(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>
MGRM	LOURDES MESTRE	14420 SW 156 AVE MIAMI, FL 33196	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	RICHARD MESTRE	14420 SW 156 AVE MIAMI, FL 33196	<input checked="" 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

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

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

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Dated MAY 11 2011

✓ 

Signature of a member or authorized representative of a member

DIANA MENDOZA ALEMAN

Typed or printed name of signee