

L160000055448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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WAIT

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(Business Entity Name)

(Document Number)

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EXAMINER



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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 AUG 25 AM 8:08

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

TEXTANGO 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:

Robert Venneri

Name of Person

TEXTANGO LLC

Firm/Company

104 CRANDON BLVD. #424

Address

Kef Biscayne FL 33149

City/State and Zip Code

RVC@TEXTANGO.COM

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

For further information concerning this matter, please call:

Robert Venneri

Name of Person

at 949 309 0515

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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11 AUG 25 AM 8:08

FILED
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DIVISION OF CORPORATIONS
17 AUG 25 PM 8:08
and assigned

Page 1 of 2

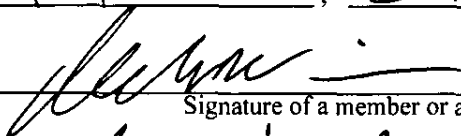
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	TANGO VENTURES LLC	104 CAMDEN BLVD. #424 KEY BISCAYNE FL 33149	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated 8/24, 2011.



Signature of a member or authorized representative of a member
ROBERT VENNELI

Typed or printed name of signee