

L11000084293

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

JUN -4 2012

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CALEL, 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:

JAQUI LEVY HARA

Name of Person

Firm/Company

20900 NE 30th Ave Suite 603

Address

Aventura, FL 33180

City/State and Zip Code

JAQUIGRUZ@HOTMAIL.COM

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

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

JAQUI LEVY HARA

Name of Person

at (**305**)

917-7673

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 25, 2012

JAQUI LEVY HARA
20900 NE 30TH AVE SUITE 603
AVENTURA, FL 33180

SUBJECT: CALEL, LLC
Ref. Number: L11000084293

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for CALEL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan
Regulatory Specialist II

Letter Number: 812A00015274

RECEIVED
JUN 01 2012
YJ.

CALEL, 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	VACAREZZA, ANDRES	20900 NE 30th Ave Suite 603 Aventura, FL 33180, USA	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	BORIANO, SILVIA	20900 NE 30th Ave Suite 603 Aventura, FL 33180, USA	<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)

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

2012 JUN - 1 PM 4:12

FILED

Dated _____

Signature of a member or authorized representative of a member

JAQUI LEVY HARA

Typed or printed name of signee