

L11000136139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300250088113

07/26/13--01011--021 **208.75

FILED
2013 JUL 26 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK
JUL 29 2013
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MDW 1060, 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 L. TRESCOTT, ESQ.

Name of Person

ROBERT L. TRESCOTT, P.L.

Firm/Company

2605 PONC DE LEON BLVD.

Address

CORAL GABLES, FL 33134

City/State and Zip Code

CJIMENEZ@TDSLAWYERS.COM

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

For further information concerning this matter, please call:

ROBERT L. TRESCOTT, ESQ. at **305 446-3117**

Name of Person

Area Code & Daytime Telephone Number

FILED
2013 JUL 26 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FL 32301

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

MDW 1060, LLC

Page 1 of 3

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	GEORGE F. PEREIRA DE SOUZA	465 BRICKELL AVE	<input type="checkbox"/> Add
		UNIT #3105	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33131	
MGR	JORGE PEREIRA DE SOUZA	2605 PONCE DE LEON BLVD.	<input checked="" type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 JUL 26 PM 2:43
Remove
Add
Remove

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

N/A

Dated

July 23rd 2013

Signature of a member or authorized representative of a member

JORGE PEREIRA DE SOUZA

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2013 JUL 26 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA