

APR/04/2016/MON 2:51 PM
4/4/2016

FAX No.
Division of Corporations

P 001

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Corporate Filing Menu

Help

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	RENE NAVARRO	780 NW 42ND AVE	<input checked="" type="checkbox"/> Add
		10	<input type="checkbox"/> Remove
		MIAMI, FL 33126	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

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Dated APRIL 4TH

~~2016~~

Signature of a member of authorized representative of a member

EDDY RODRIGUEZ

Typed or printed name of signee

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