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(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

NOV - 7 2012

EXAMINER

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: **2903 PEN II 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:

**EDUARDO RUANO**

Name of Person

**SERBER & ASSOCIATES, P.A.**

Firm/Company

**2875 NE 191 STREET, SUITE 801**

Address

**AVENTURA FL 33180**

City/State and Zip Code

**ER@SERBERLAWFIRM.COM**

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

For further information concerning this matter, please call:

**EDUARDO RUANO**

Name of Person

at **305 9326262**

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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## 2903 PEN II LLC

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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	Alvaro Cordoba	2875 NE 191 Street	<input checked="" type="checkbox"/> Add
		Suite 801	<input type="checkbox"/> Remove
		Aventura FL 33180	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

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

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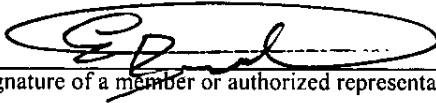
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Dated November 05, 2012



Signature of a member or authorized representative of a member

Eduardo Ruano

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**

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