

L12000119314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

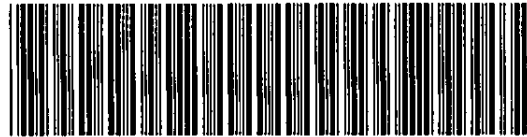
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JAN 22 PM 3:01

JAN 23 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Viva Transitions, 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:

Berardo A. Valdes

Name of Person

Medtel Alert, LLC.

Firm/Company

1111 Hickory Way

Address

Weston, FL. 33327

City/State and Zip Code

bernie@medtelalert.com

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

For further information concerning this matter, please call:

Berardo A. Valdes

Name of Person

at (**954**) **802-8388**

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

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	Berardo A. Valdes	1111 Hickory Way	<input checked="" type="checkbox"/> Add
		Weston, FL. 33327	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<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.)*

Dated January 18, 2013



Signature of a member or authorized representative of a member

Berardo A. Valdes

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
STAFF
DIVISION OF REGULATIONS
13 JAN 22 PM 3:01