

L12000133513

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

(Business Entity Name)

(Document Number)

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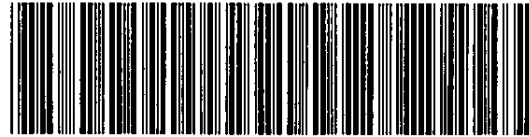
Special Instructions to Filing Officer:

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **RICHMAN GLOBAL AGENCY 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:

DEIVID GONZALEZ

Name of Person

RICHMAN GLOBAL AGENCY LLC

Firm/Company

8382 NW 68 ST

Address

MIAMI, FL 33166

City/State and Zip Code

dgonzalez@ricglobal.com

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

FILED
2014 JUL 18 PM 2:06
TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT

For further information concerning this matter, please call:

DEIVID GONZALEZ

Name of Person

at (**857**) **234-8116**

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
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| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
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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

RICHMAN GLOBAL AGENCY LLC

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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	ZUCETTE GONZALEZ	112-28 SW 239 ST	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33032	<input type="checkbox"/> Remove
GM	YARINEL ACOSTA	112-28 SW 239 ST	<input type="checkbox"/> Add
		MIAMI, FL 33032	<input checked="" type="checkbox"/> Remove
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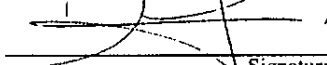
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 SECRETARY OF STATE
 MIAMI, FL 33101

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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: 06/26/2014 (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated JUNE 26TH, 2014



Signature of a member or authorized representative of a member

DEIVID GONZALEZ

Typed or printed name of signee