

**L120000135862**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

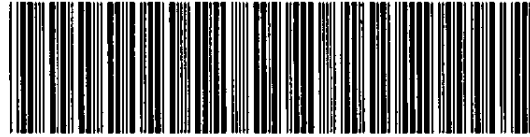
\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**AUG 16 2013**  
**L. SELLERS**

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08/12/13--01003--03U \*\*30.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 AUG 12 AM 10:10

**FILED**

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** **BAKHOS HORSES 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:

**Rafael Mendible**

Name of Person

**Bringsbout Inc**

Firm/Company

**6205 Blue Lagoon Dr Ste 130**

Address

**Miami FL 33126**

City/State and Zip Code

**info@bringabout.us**

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

For further information concerning this matter, please call:

**Rafael Mendible**

Name of Person

at **305 655-1589**

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          | ODIO, FRANCIS | 10801 NW 75 STREET | <input checked="" type="checkbox"/> Add |
|              |               | DORAL, FL 33178    | <input type="checkbox"/> Remove         |
|              |               |                    | <input type="checkbox"/> Add            |
|              |               |                    | <input type="checkbox"/> Remove         |
|              |               |                    | <input type="checkbox"/> Add            |
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|              |               |                    | <input type="checkbox"/> Remove         |

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

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Dated AUGUST 8, 2013



Signature of a member or authorized representative of a member

RAFAEL MENDIBLE

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**