

L13000001145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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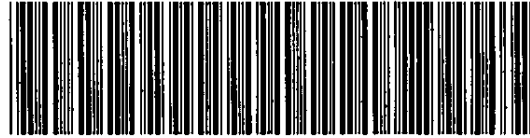
(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 MAY 19 PM 4: 36

MAY 20 2016  
S. YOUNG

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Dia-Val Properties, 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:

Mario Ramos Casanova

Name of Person

Firm/Company

8011 W. Powhatan Avenue

Address

Tampa, Florida 33615

City/State and Zip Code

Marioramcasanova1971@gmail.com

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

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For further information concerning this matter, please call:

Mario Ramos Casanova 813 270-9193  
Name of Person at ( ) 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 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>                      |
|--------------|----------------------|-------------------------|--------------------------------------------|
|              | Yliana C. Valdes     | 8011 W. Powhatan Avenue | <input type="checkbox"/> Add               |
|              |                      | Tampa, FL 33615         | <input checked="" type="checkbox"/> Remove |
|              |                      |                         | <input type="checkbox"/> Change            |
|              | Mario Ramos Casanova | 8011 W. Powhatan Avenue | <input checked="" type="checkbox"/> Add    |
|              |                      | Tampa, FL 33615         | <input type="checkbox"/> Remove            |
|              |                      |                         | <input type="checkbox"/> Change            |
|              |                      |                         | <input type="checkbox"/> Add               |
|              |                      |                         | <input type="checkbox"/> Remove            |
|              |                      |                         | <input type="checkbox"/> Change            |
|              |                      |                         | <input type="checkbox"/> Add               |
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|              |                      |                         | <input type="checkbox"/> Change            |

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

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**E. Effective date, if other than the date of filing:** 5/15/2016 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated May 15, 2016

Clara Ramos Pasanora

Signature of a member or authorized representative of a member

Mario Ramos Casanova

Typed or printed name of signee