

L13000092755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

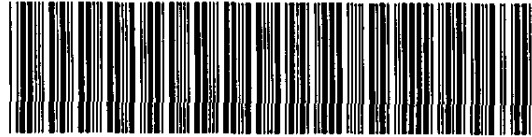
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ALDRIABELLA, 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:

Brian L Fink

Name of Person

Catlin Saxon Fink Kolski, LLP

Firm/Company

2600 Douglas Road Ste 1003

Address

Coral Gables, FL 33134

City/State and Zip Code

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

For further information concerning this matter, please call:

Jose E Alas

Name of Person

at (**305**) **3719575 x124**

Area Code & Daytime Telephone Number

11 FEBRUARY 2013
TALLAHASSEE, FLORIDA

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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

ALDRIABELLA, 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:

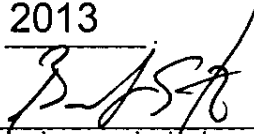
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Carlos Excudero	C/O BL FINK, 2600 DOUGLAS RD., STE 1003	<input type="checkbox"/> Add
		CORAL GABLES, FLORIDA 33134	<input checked="" type="checkbox"/> Remove
MGR	Carlos Escudero	C/O BL FINK, 2600 DOUGLAS RD., STE 1003	<input checked="" type="checkbox"/> Add
		CORAL GABLES, FLORIDA 33134	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated July 29, 2013



Signature of a member or authorized representative of a member

BRIAN L FINK

Typed or printed name of signee

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Filing Fee: \$25.00

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