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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK
SEP 24 2013
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 100 TEAM, 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:

JOSE L PEREZ

Name of Person

100 TEAM, LLC

Firm/Company

17707 NW MIAMI CT #101

Address

MIAMI, FL 33169

City/State and Zip Code

JOETEAM@BELLSOUTH.NET

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

For further information concerning this matter, please call:

JOSE L PEREZ

Name of Person

305 690-9998

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

100 TEAM, LLC

The Articles of Organization for this Limited Liability Company were filed on AUGUST 23, 2013 and assigned Florida document number L13000119879.

Page 1 of 3

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	PAUL CARRE	17707 NW MIAMI CT	<input type="checkbox"/> Add
		SUITE 101	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33169	
MGR	GERARD CONSTANT	17707 NW MIAMI CT	<input checked="" type="checkbox"/> Add
		SUITE 101	<input type="checkbox"/> Remove
		MIAMI, FL 33169	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<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 **SEPTEMBER 19**, **2013**

Signature of a member or authorized representative of a member

JOSE L PEREZ

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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