

L13000121855

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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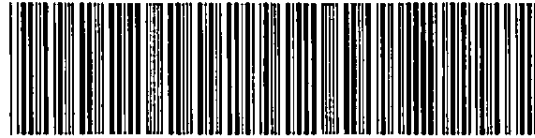
(Business Entity Name)

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TALLAHASSEE, FLORIDA

S. WARREN

OCT 09 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IRA-16 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:

IDAELMIS RAMOS-ABELENDIA
Name of Person

IRA-16 LLC
Firm/Company

13578 GREENTREE TRAIL
Address

WELLINGTON, FL 33414
City/State and Zip Code

idaelmisr417@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven Samiljan, Esq. at (561) 248-9883
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <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) |
|--|--|--|--|

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>
MGR	IDA LMIS RAMOS-ABELENDIA	13578 GREENTREE TRAIL WELLINGTON, FL 33414	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	REGINALDO ZALZABAL CARRION	13578 GREENTREE TRL WELLINGTON, FL 33414	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	REGIS ALEJANDRO ZALZABAL RAMOS	13578 GREETREE TRL WELLINGTON, FL 33414	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
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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.

Dated OCT 2 2017

IDAELMIS RAMOS- ABELENDA

Typed or printed name of signee

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