

L13 0004 33618

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 22 2014

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 1010 Design

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:

Monica Gross

Name of Person

1010 Design LLC

Firm/Company

323 N Westland Ave Apt 11

Address

Tampa, FL 33606

City/State and Zip Code

mjgross10@gmail.com

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

For further information concerning this matter, please call:

Maicon L Cavaletti

Name of Person

813 777-2280

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

1010 Design

The Articles of Organization for this Limited Liability Company were filed on Sept. 23rd, 2013 and assigned Florida document number L13000133618.

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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	Maicon Luan Cavaletti	323 N Westland Ave Apt 11	☒ Add
		Tampa, FL 33606	☐ Remove
			☐ Add
			☐ Remove
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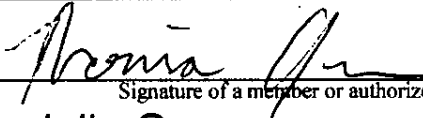
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

April 14

2014



Signature of a member or authorized representative of a member

Monica Julie Gross

Typed or printed name of signee

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Filing Fee: \$25.00

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