

L13000148890

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

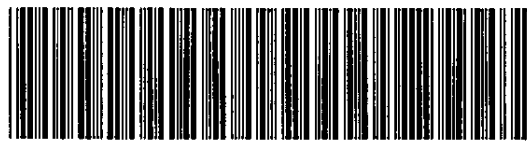
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200263397292

200263397292
10/01/14--01030--027 **25.00

FILED
14 OCT -1 PM 3:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 07 2014

S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 32nd Court Investment, 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:

Claudia Rubio

Name of Person

Windsor Title Services Inc

Firm/Company

3191 Coral Way, Suite 106

Address

Miami, FL 33145

City/State and Zip Code

claudiar@windsortitle.com

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

For further information concerning this matter, please call:

Claudia Rubio

Name of Person

at **(305) 444.2086**

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

FILED
14 OCT -1 PM 3:22
SECRETARY OF STATE
TALLAHASSEE, FL 32301

32nd Court Investment, LLC

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>
AMBR	Rafael Cedeno	848 Brickell Avenue, Suite 1215	☐ Add
		Miami, FL 32131	☒ Remove
AMBR	Angelo Prat	2137 NW 2nd Avenue	☒ Add
		Miami, FL 33127	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

FILED
14 OCT -1 3:22
SECRET
TALLAHASSEE, FLORIDA

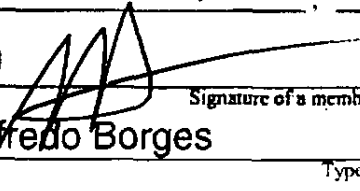
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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)

Dated September 23rd, 2014

(Y)



Signature of a member or authorized representative of a member

Alfredo Borges

Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

FILED
14 OCT -1 PM 3:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA