

L 13000151138

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

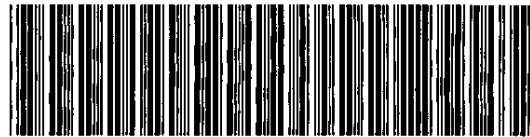
(Document Number)

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Amended

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TALLAHASSEE, FLORIDA

DEC 20 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MIA CASA REALTY, 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:

CARLOS MARRON

Name of Person

MIA CASA REALTY, LLC.

Firm/Company

3390 MARY STREET, SUITE: 116, 124 Winestico

Address

COCONUT GROVE, FLORIDA 33133

City/State and Zip Code

cemarron@gmail.com

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

For further information concerning this matter, please call:

CARLOS MARRON

at (**305**) **904-0161**

Name of Person

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

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:

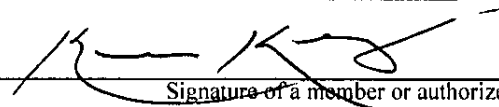
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	KUNCZ, KARLA	1331 BRICKELL BAY DRIVE	<input type="checkbox"/> Add
		UNIT: 1203	<input checked="" type="checkbox"/> Remove
		MIAMI, FLORIDA 33131	
MGRM	KUNCZ, KARLA N	3390 MARY STREET, SUITE: 116	<input checked="" type="checkbox"/> Add
		124 Winestico	<input type="checkbox"/> Remove
		COCONUT GROVE, FLORIDA 33133	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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TALLAHASSEE, FLORIDA

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

Dated DECEMBER 6, 2013



Signature of a member or authorized representative of a member

KARLA N KUNCZ

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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