

L13000162752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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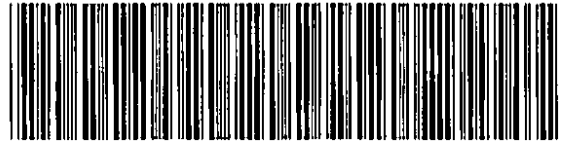
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 JUL 17 PM 1:03

N COOPER

JUL 24 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LA HACIENDA TIOS, 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:

GIACOMO BOSSA

Name of Person

MORIS & ASSOCIATES

Firm/Company

3650 NW 82nd AVE, SUITE 401

Address

DORAL, FL 33166

City/State and Zip Code

GBOSSA@ANMPA.COM

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

For further information concerning this matter, please call:

GIACOMO BOSSA

305

559-1600

at ()

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

LA HACIENDA TIOS, LLC.

Page 1 of 3

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 | SARA B CONTRERAS | 14960 SOUTHWEST 9TH LANE | <input type="checkbox"/> Add |
| | | MIAMI, FL 33194 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | JOSE CONTRERAS | 14960 SOUTHWEST 9TH LANE | <input type="checkbox"/> Add |
| | | MIAMI, FL 33194 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | LUZ A CONTRERAS | 14960 SOUTHWEST 9TH LANE | <input type="checkbox"/> Add |
| | | MIAMI, FL 33194 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | RAMON A GALINDO | 14960 SOUTHWEST 9TH LANE | <input type="checkbox"/> Add |
| | | MIAMI, FL 33194 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | MARIA H GARCIA | 14960 SOUTHWEST 9TH LANE | <input checked="" type="checkbox"/> Add |
| | | MIAMI, FL 33194 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |

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

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

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated JULY 16

2019

Signature of a member or authorized representative of a member

ANA E CONTRERAS DE HOFFMAN

Typed or printed name of signee