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(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan SEP - 4 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C&R Rodriguez Holdings, 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:

Joseph A. Porrello

Name of Person

Joseph A. Porrello, P.A.

Firm/Company

7875 SW 104th Street, Suite 103

Address

Miami, FL 33156

City/State and Zip Code

carlosrodbarr@yahoo.com

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

For further information concerning this matter, please call:

Joseph A. Porrello

Name of Person

at (305) 374-0092

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 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

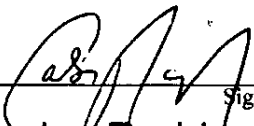
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Rose M. Rodriguez	7035 Gleneagle Drive	☒ Add
		Miami Lakes, FL 33014	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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 AUGUST 20, 2014.



Signature of a member or authorized representative of a member
Carlos Rodriguez, Manager

Typed or printed name of signee

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TALLAHASSEE, FLORIDA