

L14000008450

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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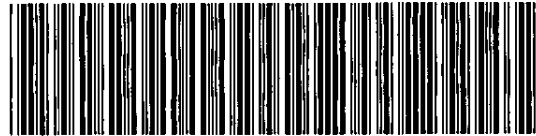
(Business Entity Name)

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TALLAHASSEE, FLORIDA

NOV 17 2014

## COVER LETTER

TO: **Registration Section  
Division of Corporations**

SUBJECT: **Miami Mega Yach Club, 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:

**Jose M. Chanfrau, IV**

\_\_\_\_\_  
Name of Person

**Jose M. Chanfrau, IV PA**

\_\_\_\_\_  
Firm/Company

**6701 Collins Avenue, Normandy Room**

\_\_\_\_\_  
Address

**Miami Beach, FL 33141**

\_\_\_\_\_  
City/State and Zip Code

**jchanfrau@josechanfraupa.com**

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

For further information concerning this matter, please call:

**Jose Chanfrau, IV**

**786**  
at (\_\_\_\_\_) \_\_\_\_\_

**621-5652**

\_\_\_\_\_  
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

**Miami Mega Yach Club, 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>
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N/A

☐ Add

☐ Remove

N/A

☐ Add

☐ Remove

N/A

☐ Add

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N/A

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

N/A

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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

10/28/14

Signature of a member or authorized representative of a member

Jose M. Chanfrau, IV Esq. as authorized representative of Jose Garcia, member.

Typed or printed name of signee

Page 3 of 3  
Filing Fee: \$25.00

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