

L140000 458 33

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

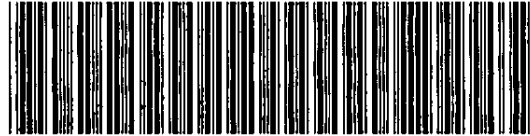
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 MAR -8 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 09 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 6714 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:

Ascanio Serna
Name of Person

6714 LLC
Firm/Company

10234 SW 131st Court
Address

Miami FL 33186
City/State and Zip Code

as7ven@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ascanio Serna at (786) 3560054
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

6714, LLC

MAR - 8
 14 3: 16
 Registered Agent
 STATE
 FLORIDA

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>
AMBR	Maria Carteira	6714 SW 114th Ave	☐ Add
		Miami, FL 33173	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
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			☐ Remove
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MGR
PH: 16
Remove
Change
Add
Remove

[illegible]

(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)

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

Dated MARCH 5th / 2016

Signature of a member or authorized representative of a member

Ascanio Serna
Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE FLORIDA