

L15D00015540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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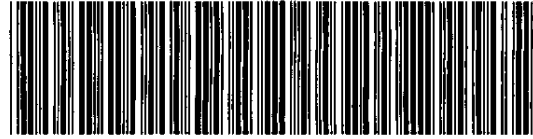
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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SEP 15 2016  
J BRUCE

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Bustillo Investments, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Amendment or Cancellation of Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Celia P. Leonardo

Name of Person

Bustillo Investments, LLC

Firm/Company

13063 SW 191 Terrace

Address

Miami FL 33177

City/State and Zip Code

celia\_p\_leonardo@yahoo.com

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

For further information concerning this matter, please call:

Celia P. Leonardo

at (

305

934-9796

Name of Person

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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**AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY**

Pursuant to section 605.0302(2), Florida Statutes, this limited liability company submits the following:

**FIRST:** The name of the limited liability company is: Bustillo Investments, LLC

**SECOND:** The Florida Document number of the limited liability company is: L15000015540

**THIRD:** The street address of the limited liability company's principal office is:

13063 SW 191 Terrace

Miami, FL 33177

The mailing address of the limited liability company's principal office is:

13063 SW 191 Terrace

Miami, FL 33177

**FOURTH:** The date the statement of authority became effective is: July 1, 2016

**FIFTH:** The statement of authority is cancelled.

**OR**

The amendment to the statement of authority is

May execute an instrument transferring real property held in the:

name of the company granted to: Irving Bustillo,

Celia Patricia Leonardo, or Darwin Bustillo.



Signature of authorized representative

Darwin Bustillo

Typed or printed name of signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

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