

LIS 0000 15766

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

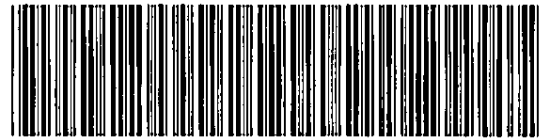
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100314045501

06/04/18--01015--C12 **25.00

FILED
18 JUN -4 AM 8:05
60

○ SIMMONS

JUN 05 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: YERR ENTERPRISES 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:

Ulises Anderson

Name of Person

SOLID ACCOUNTING

Firm/Company

240 N Biscayne River Dr

Address

MIAMI, FL 33169

City/State and Zip Code

uanderson@yoursolidaccounting.com

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

For further information concerning this matter, please call:

Ulises Anderson

786

309-3806

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

YERR ENTERPRISES 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> |
|--------------|----------------|--------------------|---|
| AMBR | Akiva Ben-Ezra | 13310 72nd Ter N. | <input checked="" type="checkbox"/> Add |
| | | Seminole, FL 33776 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Jerry Tetro | 13310 72nd Ter N. | <input checked="" type="checkbox"/> Add |
| | | Seminole, FL 33776 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <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.)*

100-111-100

E. Effective date, if other than the date of filing: 05/29/2018 (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 May 29, 2018

Signature of a member or authorized representative of a member

CHASKEL KORNWASSER

Typed or printed name of signee