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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **FEMATIMA 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:

CAROLINE LARSON

Name of Person

LARSON ACCOUNTING AND CONSULTING SERVICES LL

Firm/Company

8615 COMMODITY CIRCLE STE 06

Address

ORLANDO, FL 32819

City/State and Zip Code

PRIVATE@LARSONACC.COM

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

For further information concerning this matter, please call:

CAROLINE LARSON

Name of Person

at **407** **3703686**

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

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TALLAHASSEE, FLORIDA

FEMATIMA ENTERPRISES LLC

(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

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	IDMV CORP.	WICKHAMS CAY P.O. BOX 662	☒ Add
		ROAD TOWN, TO 00000 VG	☐ Remove
			☐ Change
AMBR	BIG FRATELLI CORPORATION	WICKHAMS CAY P.O. BOX 662	☐ Add
		ROAD TOWN, TO 00000 VG	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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WASHINGTON, D.C. 20535

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TALLAHASSEE FLORIDA

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Dated MAY, 08 2015

marcos Biqucci

Signature of a member or authorized representative of a member

MARCOS BIGUCCI

Typed or printed name of signee