

L15000 132271

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

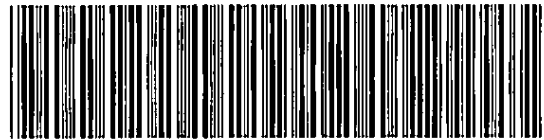
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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10/23/15--01021--018 **25.00

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R. WHITE

NOV 26 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALCIDES FERREIRA HWY 101, LLC - ADD MANAGER

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:

SABRINA WALL

Name of Person

FRANVEST MANAGMENT

Firm/Company

1080 WOODCOCK RD STE 295

Address

ORLANDO, FL 32803

City/State and Zip Code

SABRINA@FRANCHISEBA.COM

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

For further information concerning this matter, please call:

SABRINA WALL

407

856-0611

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
2601 Executive Center Circle
Tallahassee, FL 32301

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(A Florida Limited Liability Company)

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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>
MGR	FERREIRA, ALCIDES	2572 Bay Pointe Dr.	<input checked="" type="checkbox"/> Add
		Weston, FL 33327	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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[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)

Signature of Applicant or authorized agent