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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

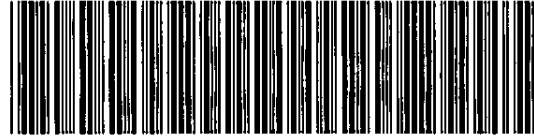
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 OCT 26 AM 11:53

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S MASON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M F Nautica Investments 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:

Oscar Martin Mazorra

Name of Person

Firm/Company

199 Fairmont Way

Address

Weston Florida 33326

City/State and Zip Code

omartin2227@yahoo.es

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

For further information concerning this matter, please call:

Oscar Martin Mazorra at (954) 740-0754
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

M F NAUTICA INVESTMENTS 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>
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MGR	Arechavaleta Carreras, Armando E	199 Fairmont Way Weston, FL 33326	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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MGR	Martin Mazorra, Oscar	199 Fairmont Way Weston, FL 33326	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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OF FLORIDA

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(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.

Dated October 21st. 2015.

Reaction.

Signature of a member or authorized representative of a member

Oscar Martin Morera.

Typed or printed name of signee

PAID
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FLORIDA STATE
UNIVERSITY