

L16000023140

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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Certificates of Status _____

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TALLAHASSEE, FLORIDA

2024 SEP 16 PM 2:46

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MEXIS MIRABELLA 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:

Samuel COHEN
Name of Person

MEXIS MIRABELLA LLC
Firm/Company

10763 BLACKHAWK ST
Address

PLANTATION, FL 33324
City/State and Zip Code

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

For further information concerning this matter, please call:

Name of Person at (_____) _____
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)

☒ YOU RECEIVED CHECK ON PREVIOUS CORRESPONDANCE (letter # 224A0001953)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

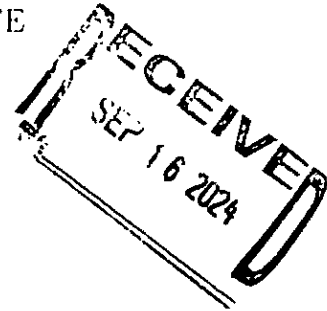


FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 30, 2024

SAMUEL COHEN
10763 BLACKHAWK ST
PLANTATION, FL 33324

SUBJECT: MERIS MIRABELLA LLC
Ref. Number: L16000023140



We have received your document for MERIS MIRABELLA LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED PARTNERSHIP, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 224A00019534

FILED

MERIS MIRABELLA UC

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

2024 SEP 16 PM 2:40
TALLAHASSEE, FLORIDA

2024 SEP 16 PM 2:46
TALLAHASSEE, 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)

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 SEPT 09, 2024

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00