

L16000078965

(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



400293053784

02/09/17--01005--027 **25.00

FILED

2017 FEB -9 P 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
FEB 10 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TS 18 investments LLC DBA Re/Max exclusive
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:

Afsaneh shakibpanah
Name of Person

TS investments LLC DBA Re/Max exclusive
Firm/Company

970 41 street
Address

Mia bch FL 33140
City/State and Zip Code

miriamshakib@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ester Tal Urdiales at (305) 494-7188
Name of Person Area Code Daytime Telephone Number

FILED
2017 FEB - 9 P 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

TS 18 investments LLC

The Articles of Organization for this Limited Liability Company were filed on 4/21/2016 and assigned Florida document number 216000078965

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>
--------------	-------------	----------------	-----------------------

manager	Aysameh Shakibpanah	4275 Meridian Ave	<input checked="" type="checkbox"/> Add
---------	---------------------	-------------------	---

		Mia bch FL 33140	<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
--	--	--	---------------------------------

			<input type="checkbox"/> Add
--	--	--	------------------------------

			<input type="checkbox"/> Remove
--	--	--	---------------------------------

			<input type="checkbox"/> Change
--	--	--	---------------------------------

FILED
 2007 FEB - 9
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

20
S
TAD

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

Feb-7-2017

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Aysameh Shakibzadeh
Typed or printed name of signer

Typed or printed name of signee