

L16000103948

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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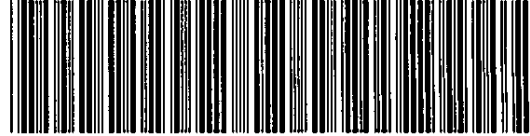
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren

JUL 15 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Assure Management Group, 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:

Luz E Guzman
Name of Person

Assure Management Group, LLC
Firm/Company

1840 West 49 Street Suite 301
Address

Hiialeah, Florida 33012
City/State and Zip Code

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

For further information concerning this matter, please call:

Luz E Guzman at (786) 427-3777
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

Assure Management Group, LLC

12:40

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>
			☐ Add
			☐ Remove
			☐ Change
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CLERK OF STATE
OF MISSISSIPPI
FLORIDA

[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)

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 7/11/2016, 2016

By E. J. J. J. J.
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Luz E. Gazman

Typed or printed name of signee

Filing Fee: \$25.00

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2018 JUL 14 P 12:40
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JANUARY 1, 1979
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