

L16000155481

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

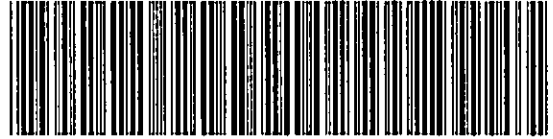
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100370076211

07/19/21--01011--022 \*\*25.00

07/19/21

07/19/21

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** LEBAMAR 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:

MERCEDES RODRIGUEZ

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

15735 SW 46 TERRACE

\_\_\_\_\_  
Address

MIAMI, FL 33185

\_\_\_\_\_  
City/State and Zip Code

mercy@architectus123.com

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

For further information concerning this matter, please call:

MERCEDES RODRIGUEZ

305 609-5217  
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 Address:**

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

## LEBAMAR LLC

**If Changing Registered Agent, Signature of New Registered Agent**

1

**MGR = Manager**

**AMBR = Authorized Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
--------------	-------------	----------------	-----------------------

\_\_\_\_\_ ☐ Add

[Remove](#)

\_\_\_\_\_ ☐ Change

☐ Add

[Remove](#)

\_\_\_\_\_ ☐ Change

\_\_\_\_\_ ☐ Add

[Remove](#)

\_\_\_\_\_ ☐ Change

\_\_\_\_\_ ☐ Add

[Remove](#)

☐ Change

☐ Add

[Remove](#)

 [Change](#)

\_\_\_\_\_ ☐ Add

[Remove](#)

\_\_\_\_\_ ☐ Change

[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 July 13. 2001.

Signature of a member or authorized representative of a member

Mercedes Rodriguez  
Typed or printed name of signer

**Filing Fee: \$25.00**