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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

NOV 2 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SURE LIFE 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:

Cecilia Brannon

Name of Person

Law Offices of Kravitz & Guerra, P.A.

Firm/Company

801 Brickell Bay Drive, Box 18

Address

Miami, FL 33131

City/State and Zip Code

cecilia@kravitzlaw.com

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

For further information concerning this matter, please call:

Cecilia Brannon

305

372-0222

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

SURE LIFE 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>
MGR	Ramiro Delgado Sanchez	801 Brickell Bay Dr. Box 18	<input checked="" type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Nelson Zuleta Vargas	801 Brickell Bay Dr. Box 18	<input checked="" type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Maria Zuleta Herrera	801 Brickell Bay Dr. Box 18	<input checked="" type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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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)

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TALLAHASSEE, FLORIDA

Dated October 20th, 2016

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Manuel Enriquez Hernandez

Typed or printed name of signee