

L16 000 177661

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

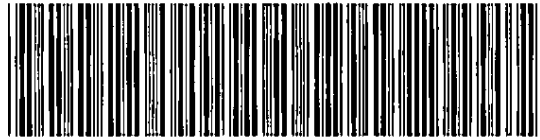
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



000329833480

06/29/19--01017--024 \*\*25.00

RECEIVED

MAY 28 2019

2019 JUN 13 PM 4:24

FILED

*Amend*

JUN 13 2019

ALBANY, NY

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Agencias Internacionales, 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:

Randy Diaz

Name of Person

Firm/Company

11870 Hialeah Gardens Drive, Unit 129B, #104

Address

Hialeah Gardens, Florida 33018

City/State and Zip Code

RDiaz@agencias-internacionales.com

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

For further information concerning this matter, please call:

Lucas Prat

786

256-3797

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

Agencias Internacionales, 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>
MGRM	Alejandro Abarca Ramirez	3030 N. Rocky Point Drive	<input type="checkbox"/> Add
		Suite 150A	<input checked="" type="checkbox"/> Remove
		Tampa, Florida 33607	<input type="checkbox"/> Change
MGRM	Randy Diaz	11870 Hialeah Gardens Boulevard	<input checked="" type="checkbox"/> Add
		Unit 129B, #104	<input type="checkbox"/> Remove
		Hialeah, Florida 33018	<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

[illegible]

**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.

Dated May 5th, 2019

Page 3 of 3  
Filing Fee: \$25.00