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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HUELLAS GUARDERIA SPA 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:

Shannon Stahlin
Name of Person

Direct Incorporation
Firm/Company

315 W Huron St., Ste 240
Address

Ann Arbor, MI 48103
City/State and Zip Code

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

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For further information concerning this matter, please call:

Shannon Stahlin at (877) 281-6496
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
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| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

HUELLAS GUARDERIA SPA LLC

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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>
AMBR	Jesus Rivero Bertorelli	14376 SW 96th Terr	<input checked="" type="checkbox"/> Add
		Miami, FL	<input type="checkbox"/> Remove
		33186	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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Dated April 30th, 2018

Alfa Munoz
Signature of a member

Signature of a member or authorized representative of a member

Olga Mariela Diaz

Typed or printed name of signee