

L16000215525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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FEB 29 2020
S. YOUNG

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2020 FEB -3 PM 2:56

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROUNDSTONE VENTURES 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:

YAN VALDES

Name of Person

VALDES CPA & ADVISORS, P.A.

Firm/Company

848 BRICKELL AVENUE STE 625

Address

MIAMI, FL 33131

City/State and Zip Code

YVALDES@VALDESCPA.COM

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

For further information concerning this matter, please call:

YAN VALDES

305 517-3309

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input 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 32304-6327

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
1000 North Florida Avenue
Tallahassee, FL 32304

FILED
2020 FEB - 3 PM 2:56
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
and assigned

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

If Changing Registered Agent, Signature of New Registered Agent

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	YAN VALDES	C/O 848 BRICKELL AVENUE, STE 625	<input type="checkbox"/> Add
		MIAMI, FL 33131	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	NIALL MERRY	5221 SUNSET DRIVE	<input checked="" type="checkbox"/> Add
		MIAMI FL 33143	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	LAURA K SOMERS	5221 SUNSET DRIVE	<input checked="" type="checkbox"/> Add
		MIAMI FL 33143	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> 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.

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00