

116000226434

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

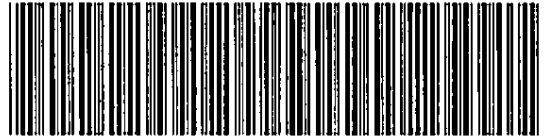
(Business Entity Name)

(Doc. nt Number)

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

Special Instructions to Filing Officer:

Office Use Only



400312387404

400312387404  
05/02/18--01014--005 \*\*10.0

400312387404  
05/02/18--01014--005 \*\*55.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 MAY -2 AM 7:25

N COOPER

MAY 04 2018



1 Radisson Plaza, Suite 800  
New Rochelle, NY 10801

4/26/2018

Division of Corporations

Re: Apostille Request

For: **BUSINESS OFFICE MANAGEMENT LLC**

Dear Sir or Madam,

1. Enclosed please find Articles of Amendment and Certified Copy Request of Articles of Amendment for **BUSINESS OFFICE MANAGEMENT LLC**

Appropriate Fee of \$55.00 (Check # 0417) is enclosed.

2. Please attach an Apostille to a Certified Copy, to be used in Greece.

Appropriate Fee of \$10.00 (Check # 0426) is enclosed.

**Kindly return filed paperwork to:**

MyUSACorporation.com  
c/o Julia Greenberg-Aguilar  
1 Radisson Plaza, Suite 800  
New Rochelle, NY 10801

Thank you for your cooperation.

Sincerely,

Julia Greenberg-Aguilar  
Senior Manager

**MyUSACorporation.com**

+1 (877) 330-2677

julia@myusacorporation.com

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BUSINESS OFFICE MANAGEMENT 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:

Julia Greenberg - Aguilar

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

MyUSAcorporation.com

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

1 Radisson Plaza, Ste.800

\_\_\_\_\_  
Address

New Rochelle, NY 10801

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

giatridis@yahoo.com

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

For further information concerning this matter, please call:

Julia Greenberg-Aguilar

877- 330-2677  
at ( )

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

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

BUSINESS OFFICE MANAGEMENT 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>
AMBR	GEORGE S IATRIDIS	1101 BRICKELL AVE., STE. GO	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33231	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	EUROPA LION LLC	1101 BRICKELL AVE., STE. GO	<input type="checkbox"/> Add
		MIAMI, FL 33231	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GEORGE S IATRIDIS	1101 BRICKELL AVE., STE. GO	<input type="checkbox"/> Add
		MIAMI, FL 33231	<input checked="" 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

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

18 MAY -2 AM 7:25

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(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)

**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.

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 April 24th 2018

Signature of a member or authorized representative of a member

GEORGE IATRIDIS - Member

Typed or printed name of signee