

L17000033562

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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MAR 27 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Carne Express 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:

Sandor Toledo

Name of Person

Carne Express LLC.

Firm/Company

3705 SW 68th AVE

Address

Miramar, FL 33023

City/State and Zip Code

CarneExpress7@gmail.com

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

For further information concerning this matter, please call:

Sandor Toledo

786

412-2686

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

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	Sandor Toledo	3705 SW 68th AVE	<input checked="" type="checkbox"/> Add
		Miramar, FL 33023	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Sergio A. Fonseca	3705 SW 68th AVE	<input type="checkbox"/> Add
		Miramar, FL 33023	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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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.

(b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Sandor Toledo

Typed or printed name of signee